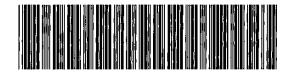
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: NDA of Florida, Inc.		
(Name of Corporation)		
DOCUMENT NUMBER: F96000003603		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Stacey G. McLaughlin		
(Name of Person)		
SeniorHealth Incorporated		
(Firm/Company)		
49 Music Square West, Suite 502		
(Address)		
Nashville, Tennessee 37203		
(City/State and Zip code)		
For further information concerning this matter, please	se call:	
Stacey G. McLaughlin at a	(615 ₎ 321-5577	
(Name of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA NDA of Florida, Inc. (Name of Corporation) F96000003603 (Document Number of Corporation (if known) Tennessee (Incorporated Under Laws of) This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida. This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida. The following is a current mailing address for the corporation: 49 Music Square West, Suite 502 (Mailing Address) Nashville, Tennessee 37203 (City/ State /Zip) The corporation agrees to notify the Department of State in the future of any change in its mailing address. (Signatute of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) Kevin D. Lee President

FILING FEE \$35

(Title of person signing)

(Typed or printed name of person signing)