

F96000006754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

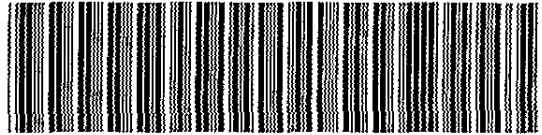
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

withdrawal

T BROWN FEB - 7 2003

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Chartered Health Network, Inc.
(Name of corporation)

DOCUMENT NUMBER: F96000006754

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Monica Langley, Paralegal
(Name of Person)

McDonald, Hopkins, Burke & Haber Co., L.P.A
(Firm/Company)

2100 Bank One Center, 600 Superior Avenue
(Address)

Cleveland, OH 44114
(City/State and Zip code)

For further information concerning this matter, please call:

Monica Langley at (216) 348-5406
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Amendment Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL. 32399

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

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL
OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS
IN FLORIDA**

Chartered Health Network, Inc.

(Name of Corporation)

Delaware

(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:

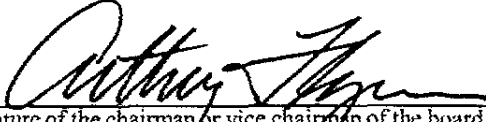
3637 Medina Road, Suite 300

(Mailing Address)

Medina, OH 44256

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.



Signature of the chairman or vice chairman of the board, president, or any officer, or if the corporation is in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary.

President

Title

Arthur Flynn

Typed or printed name

1-27-03
Date

03 FEB -4 PM 1:05
FILED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE