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Requester's Name	
Address	
City/State/Zip	Phone #

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-04/23/01--01144--023
****245.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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CLERK OF STATE
TALLAHASSEE FLORIDA

- | | | |
|------------------------------------|---------------------------------------|--|
| ☐ Walk in | ☐ Pick up time | ☐ Certified Copy |
| ☐ Mail out | ☐ Will wait | ☐ Certificate of Status |
| ☐ Photocopy | | |

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

With
5-2-01
AMS

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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

Bibb Health & Rehabilitation, Inc.
(Name of Corporation)

Georgia
(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 to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

101 Sun Ave NE
(Mailing Address)

Albuquerque, NM 87109
(City/State/Zip)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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

Mike Berg Secretary
Signature of the chairman or vice chairman of the board, Title
president, or any officer.
Mike T. Berg 4/10/01
Typed or printed name Date