## F9700001625

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## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: LCS/Venice, Inc.			
(Name of Corporation)			
DOCUMENT NUMBER: F97000001625			
The enclosed withdrawal application and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Rebecca S. Stoll			
(Name of Person)			
Life Care Services LLC			
(Firm/Company)			
400 Locust Street, Suite 820			
(Address)			
Des Moines, IA 50309-2334			
(City/State and Zip code)			
For further information concerning this matter, please call:			
Rebecca S. Stoll at ( 515	<sub>)</sub> 875-4674		
	ea Code & Daytime Telephone Number)		
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

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

LCS/Venice, Inc.	
(Name of Corpor	oration (if known)
50700004005	12
F97000001625	
(Document Number of Corpo	oration (if known)
lowa	
(Incorporated Under	Laws of)
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders.	nduct affairs in Florida.
This corporation revokes the authority of its registered agrappoints the Department of State as its agent for service of p time it was authorized to transact business or conduct affairs	rocess based on a cause of action arising during the
The following is a current mailing address for the corporation	n:
400 Locust Street, Suite 820	
(Mailing Addr	ess)
Des Moines, IA 50309-2334	
(City/ State /Z	Cip)
The corporation agrees to notify the Department of State in t	
(Signature of a director, president or other officer - if in the hands of a	April 6, 2010 (Date)
(Signature of a director, president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Rebecca S. Stoll	Assistant Secretary
(Typed or printed name of nerson signing)	(Title of person signing)

FILING FEE \$35