

Document Number Only

F97000002488

CT CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name
TALLAHASSEE, FL 32301

Address
222-1092

City State Zip Phone

CORPORATION(S) NAME

FILED
97 NOV -5 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100002339801--8
-11/06/97--01026--006
*****35.00 *****35.00

Tandem Health Care, Inc.

withdrawal

RECEIVED
97 NOV -5 AM 11:45
SECRETARY OF CORPORATION

- | | | |
|--|--|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | | |
| <input type="checkbox"/> Limited Liability Co. | | |
| <input type="checkbox"/> Foreign | <input checked="" type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of R.A. |
| | | <input type="checkbox"/> Fictitious Name Filing |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name	
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CR2E031 (1-89)

NOV 05 1997

C. TAX
FILING
AGENT FEE 35
COPY
PL. BANK
BALANCE DUE 35
REFUND

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

Tandem Health Care, Inc.

(Name of Corporation)

Pennsylvania

(Incorporated Under Laws Of)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

c/o Buchanan Ingersoll Professional Corporation Attn: Rosemary L. Corsetti, Esq.
One Oxford Centre, 20th Floor, 301 Grant Street

(Mailing Address)

Pittsburgh, PA 15219

(City - State - Zip)

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


Signature

Lawrence R. Deering

Typed or printed name

Chairman

Title

10/22/97
Date