F9700000 3040

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300023195123

09/22/03-01043--012 **52.50

03 SEP 22 AM 9: 24

De 9/26/03

TRANSMITTAL LETTER

	ndment Section		
Divis	sion of Corporati	ions	
SUBJECT:	STAT NURSING	SERVICES, INC.	
			corporation)
DOCUMEN	T NUMBER:	F97000003040	
The enclosed	i withdrawal ag	pplication and fee	are submitted for filing.
Please return matter to the	_	nce concerning this	S
(Name of Person)		son)	CHARLES K. LEWIS ATTORNEY AT LAW 1966 LOMBARD STREET SAN FRANCISCO, CA 94123-2807
	(Firm/Compa	any)	
	(Address	\$)	en la martina de la companya del companya del companya de la compa
(City/State and Z	ip code)	
		erning this matter,	
Charle	es K. fen	·/·S	at (415) 346-9995
	(Name of Pers	son)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:			MAILING ADDRESS:
Amendment Section Division of Corporations			Amendment Section Division of Corporations
409 E. Gaine	•		P.O. Box 6327
Tallahassee FI 32399			Tallahassee, FL 32314

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

(Name of Corporation)

California					
(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:					
2740 VAN NESS AVE., STE. 210					
(Mailing Address)					
SAN FRANCISCO, CA 94109					
(City/ State /Zip)					
The corporation agrees to notify the Department of State in the future of any change in the 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. KATHLEEN R. CLEARY					
Typed or printed name / Date /					

STAT NURSING SERVICES, INC.