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FILED 00 OCT 20 PM 2: 39

ACCOUNT NO.

SECRETARY OF STATE : 07210000003PALLAHASSEE, FLORIDA

REFERENCE: 870618

4334907

AUTHORIZATION _ :

COST LIMIT

ORDER DATE: October 20, 2000

ORDER TIME: 11:49 AM

ORDER NO. : 870618-005

600003433726--5

CUSTOMER NO: 4334907

CUSTOMER: Ms. Heather Burgess

Hca The Healthcare Company

Po Box 750 One Park Plaza

Nashville, TN 37203

FOREIGN FILINGS

NAME:

HCA- HOSPITAL CORPORATION OF

AMERICA

XX___ PROFIT NON-PROFIT CORPORATE

LIMITED PARTNER

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: .

_ CERTIFIED COPY

PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

& COULLIETTE OCT 2 0 2000

CONTACT PERSON: Jeanine Reynolds EXT 1133

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

HCA - Hospital Corporation of America	
(Name of Corporation)	意って
	1 Sept 1
Delaware	19 B
(Incorporated Under Laws Of)	50% 13
	24 8 24 8
	<u> </u>
This corporation is no longer transacting business or conducting affairs within the St	ate of Florida
and hereby voluntarily surrenders its authority to transact business or conduct affairs	ın 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 second secon	anil a communi
The following is a current mailing address to which the Department of State may n	ian a copy or
any process against this corporation that may be served on the Department.	
One Park Plaza	
(Mailing Address)	
Nashville, Tennessee 37203	
(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, Title	
president, or any officer.	
•	
David Denson October 19, 2000	
Typed or printed name Date	