

F9700006113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

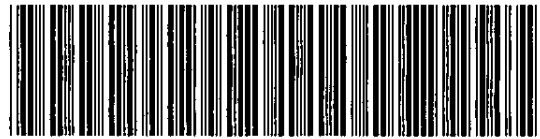
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2009 JAN 22 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

W. H. HARRIS
RJ

1-2909



WILLIAMS MULLEN

Direct Dial: 804.783.6580
scarro@williamsmullen.com

January 21, 2009

VIA FEDERAL EXPRESS

State of Florida
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Tandem Health Care, Inc. – Application for Withdrawal of Authority
Tandem Health Care, LLC – Application for Authorization

Dear Sir or Madam:

The referenced corporation has merged into a limited liability company in its state of organization. Please file the enclosed application to withdraw the corporation. A firm check in the amount of \$43.75 is enclosed to cover the filing fee and certified copy request.

An application to register the limited liability company is also enclosed. A firm check in the amount of \$155.00 is enclosed to cover the filing fee and certified copy request.

If you have any questions or need any additional information, please contact me at (804) 783-6580. Thank you for your attention to the enclosed filings.

Very truly yours,

Sharon M. Carro
Corporate Paralegal

/smc

Enclosures

cc: Derek Kung, Esquire

1694101v1

A Professional Corporation

NORTH CAROLINA • VIRGINIA • WASHINGTON, D.C. • LONDON

Two James Center 1021 East Cary Street (23219) P.O. Box 1320 Richmond, VA 23218-1320 Tel: 804.643.1991 Fax: 804.783.6507
www.williamsmullen.com

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tandem Health Care, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F97000006113

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sharon M. Carro

(Name of Person)

Williams Mullen

(Firm/Company)

1021 E. Cary Street

(Address)

Richmond, VA 23219

(City/State and Zip code)

For further information concerning this matter, please call:

Sharon M. Carro

(Name of Person)

at (804

) 783-6580

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

MAILING ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Tandem Health Care, Inc.

(Name of Corporation)

F97000006113

(Document Number of Corporation (if known))

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 for the corporation:

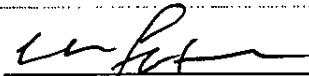
1035 Powers Place

(Mailing Address)

Alpharetta, GA 30009

(City/ State /Zip)

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



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

1-21-2009

(Date)

Christopher M. Sertich

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35