

F98000005476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

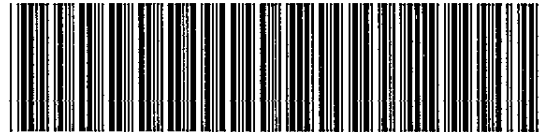
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Withdrawn

01/06/03--01072--001 **35.00

01/06/03--01072--002 **8.75

RECEIVED
03 JAN -6 PM 12:03
DIVISION OF CORPORATION

FILED
02 JAN -6 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/6/03

CT CORPORATION

January 6, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

Re: Order #: 5756262 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Intelistaf Health Services (Staffing), Inc. (DE)
Withdrawal
Florida

Please return a certified copy along with regular evidence.

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton
Sr. Fulfillment Specialist
Jeff_Netherton@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

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

InteliStaf Health Services (Staffing), Inc.

(Name of Corporation)

Delaware

(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:

1000 S. Rodney Parham Rd.

(Mailing Address)

Little Rock, Arkansas 72204

(City/ State /Zip)

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



Vice President

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.

Title

R. Reed Thompson

Typed or printed name

1.3.03

Date

FILED
JAN -6 PM 3:53
TALLAHASSEE, FLORIDA
STATE