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(Business Entit	y Name)
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withdrawal

08/28/12--01013--030 **160.00

TALLAHASSEE. FLORID

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WHEdrawal COVER LETTER
TO: Amendment Section
Division of Corporations
SUBJECT: BRAVO HEALTH, INC.
(Name of Corporation)
DOCUMENT NUMBER: F98000056660
The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following:
Teresa R.J. Jordan, General Counsel of Ops.
(Name of Person)
Bravo Health
(Firm/Company)
2900 North Loop West, Ste. 1300
(Address)
Houston, TX 77092
(City/State and Zip code)
For further information concerning this matter, please call:
Danna White, Corp. Paralegal at (832) 553-3596
(Name of Person) Enclosed is a check for the amount: (Area Code & Daytime Telephone Number)
\$\sqrt{\$35\ Filing Fee}\$\$43.75\ Filing Fee & Same Securified Copy (Additional copy is Enclosed) \$\sqrt{\$43.75\ Filing Fee}\$\$ Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

Division of Corporations 2661 Executive Center Circle

Tallahassee, FL. 32301

Division of Corporations

Tallahassee, FL.32314

P.O. Box 6327

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

BRAVO HEALTH, INC. (Name of Corporation)	
F98000005660	2812 TALL
(Document Number of Corporation (if kno	FIL AUG 28 AHASSI
(Incorporated Under Laws of)	ANII:
This corporation is no longer transacting business or conducting affairs voluntarily surrenders its authority to transact business or conduct affairs	
This corporation revokes the authority of its registered agent in Floridappoints the Department of State as its agent for service of process bas the time it was authorized to transact business or conduct affairs in Florida	sed on a cause of action arising during
The following is a current mailing address for the corporation:	
3601 O'DONNELL ST.	
(Mailing Address)	
BALTIMORE, MD 21224	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of X (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	any change in its mailing address. 8 8 12 (Date)
. ,	P&Secretary
(Typed or prioted name of person signing)	(Title of person signing)

FILING FEE \$35