

F99000001577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

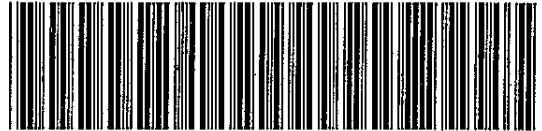
(Business Entity Name)

(Document Number)

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04 MAY 18 AM 8 54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5/24  
WARRICK

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Benefit Claims Payors, Inc.  
(Name of corporation)

**DOCUMENT NUMBER:** F990000001577

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

Please return all correspondence concerning this matter to the following:

Mary Fritchey  
(Name of Person)

Benefit Claims Payors, Inc.  
(Firm/Company)

1717 W. Northern Avenue, Suite 200  
(Address)

Phoenix, AZ 85021  
(City/State and Zip code)

For further information concerning this matter, please call:

Mary Fritchey  
(Name of Person)

at (602) 861-6868 x 4407  
(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL. 32399

**MAILING ADDRESS:**

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

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

Benefit Claims Payors, Inc.

(Name of Corporation)

F990000001577

(Document Number of Corporation (if known))

Arizona

(Incorporated Under Laws of)

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04 MAY 18 AM 8:54  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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:

1717 W. Northern Avenue, Suite 200

(Mailing Address)

Phoenix, AZ 85021

(City/State/Zip)

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

Mark V. Mertel

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

5/11/04

(Date)

Mark V. Mertel

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35