

F9900003449

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PROMEDCO MANAGEMENT COMPANY, INC.
(Name of corporation)

DOCUMENT NUMBER: A99000003449

The enclosed **Application for Withdrawal** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Isabel Mahmood
(Name of Person)

Promedco Management Company
(Firm/Company)

5005 Riverway Drive
(Address)

Houston, TX 77056
(City/State and Zip code)

For further information concerning this matter, please call:

Isabel Mahmood
(Name of Person)

713-629-5777
(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

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CLERK OF STATE
TALLAHASSEE, FLORIDA

02 JUL 24 AM 9:09

FILED

Ps 7/31/02 W. Adams

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

ProMedCo Management Company
(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:

5005 Riverway Dr. Ste. 400
(Mailing Address)

Houston, TX 77056
(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,
president, or any officer, or if the corporation is in the hands of a
receiver, trustee, or other court-appointed fiduciary, by that fiduciary.

President
Title

Mike Yeary
Typed or printed name

7/9/02
Date

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02 JUL 24 AM 9:09
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA