M03000002541

(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

G. HARVEY
JUL 14 2009
EXAMINER

INTEGRITAS HEALTH CARE, LLC

Jume 29, 2009

VIA OVERNIGHT MAIL

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

RE: Entity: ***Integritas Healthcare, LLC***
Document#: ***M03000002541***

Dear Sir/Madam:

Please accept this letter as notification that we would like to voluntarily dissolve the above mentioned entity. Please see enclosed check # 1110 to cover the expense of $25.00 to dissolve the above mentioned entity.

If you have any questions, or require any additional information please do not hesitate to contact me.

Best Regards,

Jazzmine Scott, Legal Assistant
Home Quality Management, Inc.

/jjs

P.O. Box 31809
Palm Beach Gardens, FL 33420
Phone: 561-366-6600
Fax: 561-273-6184

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Integritas Health Care, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jazzmine Scott
(Name of Person)

Home Quality Management, Inc.
(Firm/Company)

PO Box 31809
(Address)

Palm Beach Gardens, Fl 33420
(City/State and Zip Code)

For further information concerning this matter, please call:

Jazzmine Scott at (561) 366-6600 X215
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☑ $25 Filing Fee ☐ $30 Filing Fee & Certificate of Status ☐ $55 Filing Fee & Certified Copy ☐ $60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

Integritas Health Care, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

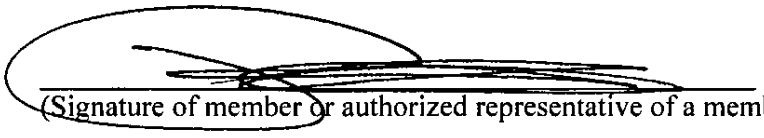
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent 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 in Florida.

PO Box 31809
(Mailing address)

Palm Beach Gardens, Fl 33420
(City/State/Zip)

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


(Signature of member or authorized representative of a member)

Paul Walczak, CEO
(Typed or printed name of signee)

FILED
09 JUL 13 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: $25.00