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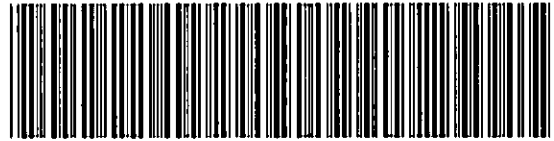
(Business Entity Name)

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NAME: UNIFIED WOMEN'S HEALTHCARE, LLC

TYPE OF FILING: WITHDRAWAL

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AUTHORIZATION: ABBIE/PAUL HODGE

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

UNIFIED WOMEN'S HEALTHCARE, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

08/14/2013

(Date registered with Florida Department of State)

M13000005139

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)
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(Signature of authorized representative)

JOHN CAMPERLENGO

(Typed or printed name of signee)

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