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April 3, 2000

HOME MEDICAL OF AMERICA, INC. RE:

(DE. DOM.)

D/B/A HMA

(DE. DOM.)

NHC, INC.

D/B/A NHC, INC. OF DELAWARE

Secretary of State Corporate Records Bureau Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Dear Sir:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed are 2 checks in the amount of \$87.50 each to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self-addressed envelope.

Very truly yours,

C T CORPORATION SYSTEM

ATTN: AGENT SERVICES DIVISION CT CORPORATION SYSTEM 111 8TH AVE FL 13

NEW YORK NY 10114-1868

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:hm Enclosure

RA Pesi. 4/14/00

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	ı	
Florida Statutes, the undersigned, C T CORPORATION SYSTEM (Name of registered agent)	<u> </u>	. Sin s
hereby resigns as Registered Agent for NHC, INC. (DE. DOM.) D/B/A NHC, INC. OF DELAWARE (Name of corporation)		
A copy of this resignation was mailed to the above listed corporation at its last known add C/O Home Medical of America, Inc. PO Box 5050 Cherry Hill, NJ 08034-5050 Attn: Martin Goldman CPA/Director of Tax The agency is terminated and the office discontinued on the 31st day after the date on who this statement is filed.	dress. nich	
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(Signature of resigning agent) If signing on behalf of an entity:	OO APR	
C T CORPORATION SYSTEM (Typed or Printed Name)	ASSI ASSI	FILED
ASSISTANT SECRETARY	MID: 4	
(Capacity)	Dri F	

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314