33859



DECEMBED

98 FEB 24 PM 4: 17

ACCOUNT NO. :

OWZISBOOF OF PORATION

REFERENCE :

661121

4334907

AUTHORIZATION :

COST LIMIT

ORDER DATE: January 7, 1998

ORDER TIME : 2:20 PM

ORDER NO. : 661121-060

CUSTOMER NO: 4334907

400002439864--2

CUSTOMER: Ms. Dora Blackwood

Columbia/hca Healthcare

P.o. Box 550 One Park Plaza

Nashville, TN 37202

FOREIGN FILINGS

NAME: EPIC MASTER LEASING, INC.

XX PROFIT

____ NON-PROFIT

XX CORPORATE

LIMITED PARTNERSHIP

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

___ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder

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

	984
EPIC MASTER LEASING, INC	C. 😛
(Name of Co	rporation)
DELAWAR e £	c. FEB 22 PM
(Incorporated U	Inder Laws Of)
This corporation is no longer transacting busi Florida and hereby voluntarily surrenders its au Florida.	
This corporation revokes the authority of its reg behalf and appoints the Department of State as of action arising during the time it was author Florida	its agent for service of process based on a cause
The following is a current mailing address to whany process against this corporation that may be	
One Fark Plaz (Mailing A	ddress)
Moshvilla, TN 3	7203 /Zip)
The corporation agrees to notify the Department of address.	of State in the future of any change in its mailing
Da a. Blackings	Asst. Secretary
Signature	Title
Dora A. Blackwood	Z-lp-98
Typed or printed name	Date