SOUND PROTECTION B PEAFUL SETTLEMENT 9658



Amendment Section
Division of Corporations
P.O Box 6327
Tallahassee, Florida 32314

RE: Coordinated HealthCare Management, Inc.

Dear Sir:

Please find enclosed the completed application by foreign corporation for withdrawal for Coordinated (HealthCare Management, Inc. along with a check in the amount of \$35.00 for the required fee. Should you need additional information for the completion of this filing, please let me know.

Yours truly,

Janet P. Webster

Enclosure

Telephone: 800-635-4252, ext. 5309

Facsimile: 803-283-5313

N FLORIDA	CONDUCT AFFAIRS
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COORDINATED HEALTHCARE MANAGEMENT, INC. (Name of Corporation)	This My
(intaile of Cosposition)	Ser of
NORTH CAROLINA	
(Incorporated Under Laws Of)	**************************************
is corporation is no longer transacting business or conducting af d hereby voluntarily surrenders its authority to transact business on is corporation revokes the authority of its registered agent in least and appoints the Department of State as its agent for services tion arising during the time it was authorized to transact business of	r conduct affairs in Florida. Florida to accept service on its of process based on a cause of
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P.O BOX 610 P.O BOX 610 (Mailing Address) LANCASTER, SOUTH CAROLINA 29721-0610 (City/ State /Zip) the corporation agrees to notify the Department of State in the fur	ture of any change in its mailing
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