

P39686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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16 AUG -9 AM 11:17
2016 AUG -9 AM 9:34
SECRETARY OF STATE
DIVISION OF CORPORATIONS

AUG 10 2016

C LEWIS

Please file first

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 247476 4358473

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : August 8, 2016

ORDER TIME : 3:35 PM

ORDER NO. : 247476-015

CUSTOMER NO: 4358473

FOREIGN FILINGS

NAME: SUNDANCE REHABILITATION
CORPORATION

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

2016 AUG -9 AM 9:34

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

SunDance Rehabilitation Corporation

(Name of Corporation)

P39686

(Document Number of Corporation (if known))

Connecticut

(Incorporated Under Laws of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida 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 or conduct affairs in Florida.

The following is a current mailing address for the corporation:

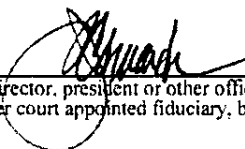
101 E. State Street

(Mailing Address)

Kennett Square PA 19348

(City/ State /Zip)

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



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

8/8/16

(Date)

J. Richard Edwards

(Typed or printed name of person signing)

Treasurer

(Title of person signing)

FILING FEE \$35