Division of Corporations

Page 1 of 1

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000109235 9)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name

: AKERMAN, SENTERFITT OF JACKSONVILLE

Account Number : 105543000740

Pt.one

(904)798-3700

Fax Number

: (904)354-4459

LIVISION OF CORPORATIONS 03 APR -9 AH 10: 40

REGISTERED AGENT RESIGNATION

TOTAL PATIENT CARE HOME HEALTH, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$87.50

Electronic Filing, Menu

Corporate Filing

Public Access Help

H03000109235

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Section 607.0502(2), Florida Statutes, the undersigned, Motolaw, Inc., hereby resigns as Registered Agent for TOTAL PATIENT CARE HOME HEALTH, INC., a Florida corporation.

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Dated the 9th day of April, 2003.

MOTOLAW, INC.

Robert G. Shaffer II, President

2003 APR -9 PM 3: IO