State of Idaho

Office of the Secretary of State

OF CAREINSTITUTE

File Number C 96651

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that Application for Certificate of Withdrawal from this State, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Withdrawal and attach hereto a duplicate of the Application for such Certificate.

Dated: June 23, 2008



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By Danamato all I all



APPLICATION FOR CERTIFICATE 08 JUN 23 PH 12: 57 OF WITHDRAWAL SECRETARY

SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

To the Secretary of State of Idaho

Pursuant to Section 30-1-1520, Idaho Code, the undersigned Corporation hereby applies for a certificate of withdrawal from the State of Idaho, and for that purpose submits the following statement:

The name of the corporation is:	
CareInstitute	
The name which it used in Idaho is	3:
It is incorporated under the laws of	California
It is not transacting business in the	
It hereby surrenders its authority to	o transact business in said state.
consents that service of process in arising in the State of Idaho during	tered agent in the State of Idaho to accept service of process and nany action, suit or proceeding based upon any cause of action g the time it was authorized to transact business therein may ered or certified mail to the corporation at the address listed in item
The post office address to which p	process against the corporation may be mailed is:
3405 W. Dr. Martin Luther King .	Jr. Blvd., #101, Tampa, FL 33607
	f State of the State of Idaho of any change to the address in Item 6.
lot B	Customer Acct #: (if using pre-paid account) Secretary of State use only
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yped Name Scott Bates	C 9662)
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