## State of Idaho

Office of the Secretary of State

OF REHAB PEOPLE, INC.

File Number C 123109

I, PETE T. CENARRUSA, 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: March 23, 2001



Pet / Cemeruse SECRETARY OF STATE

By July William



## APPLICATION FOR CERTIFICATE OF WITHDRAWAL

(Instructions on back of application)

	nis <u>Ren</u>	ab People,	THO.		<u></u>	
The name which it used in Idaho is			<u> </u>	<b>S</b> (3)	<u> </u>	
					Ž.	18 N
It is incorporated under the	laws of	Pennsylva	nia		<u> </u>	ယ အာ
It is not transacting business in the State of Idaho.			WHO N	8: 3		
		t business in	said state		(T)	9
It hereby surrenders its aut	hority to trans	sact business in	Sala State.			
It hereby surrenders its aut It revokes the authority of it consents that service of pre arising in the State of Idaho thereafter be made on it by 6., below.	s registered ocess in any	agent in the Sta action, suit or p	ite of Idaho to ac oceeding based rized to transact	upon a busine	any cause ess therein	may
It revokes the authority of it consents that service of pro arising in the State of Idaho thereafter be made on it by	s registered ocess in any oduring the ti registered or	agent in the Sta action, suit or p ime it was author r certified mail to	ate of Idaho to ac roceeding based rized to transact the corporation	upon a busine at the a	any cause ess therein address lis	may sted i

By Massa Warlow

lts Vice President

(specify capacity of signer)

Customer Acct #:

IDAHO SECRETARY OF STATE (if using pre-paid account)

CX: 500036 CT: 144110 BH: 38634

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