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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations | |
|---|-----------------------|
| SUBJECT: GeriMed of America, Inc. | |
| (Name of corporation) | |
| DOCUMENT NUMBER: F94000004961 | _{Se} Marin - |
| The enclosed withdrawal application and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | · = |
| James Riopelle | |
| (Name of Person) | |
| (1.101.1) | |
| (Firm/Company) | ÷ (|
| 2290 S. Adams Street | |
| (Address) | |
| Denver, CO 80210 | , F - |
| (City/State and Zip code) | |
| For further information concerning this matter, please call: | |
| James Riopelle at (720) 529-8888 (Name of Person) (Area Code & Daytime Telephone Number) | |
| STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines St. Tallahassee, FL. 32399 MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314 | |

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

| GeriMed of America, Inc. |
|---|
| (Name of Corporation) |
| |
| F94000004961 |
| (Document Number of Corporation (if known) |
| |
| |
| Colorado Σ |
| (Incorporated Under Laws of) |
| mag 😩 [|
| 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 |
| voluntarily surrenders its authority to transact business or conduct affairs in Florida. |
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| 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: |
| |
| 2290 S. Adams Street (Mailing Address) |
| (Maining Address) |
| |
| Denver, CO 80210 |
| (City/ State /Zip) |
| |
| |
| The corporation agrees to notify the Department of State in the future of any change in its mailing address. |
| |
| Give 15 105/05 |
| (Signature of a director, president or other officer - if in the hands of a (Date) |
| receiver or other court appointed fiduciary, by that fiduciary) |
| <i>'</i> |
| James Riopelle President |
| (Typed or printed name of person signing) (Title of person signing) |

FILING FEE \$35