	State of Rhode Island	Fee: \$50.00
	Office of the Secretary of State	
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615	
1636	(401) 222-3040	
Foreign Corporation		
Application for Certificate of Withdrawal (Section 7-1.2-1412 of the General Laws of Rhode Island, 1956, as amended)		
(Section 7-1.2-1412	of the General Laws of Knoue Island, 1950, as amended)	
	SECTION I	
The name of the corporation is Workit Health (CA), P.C.		
SECTION II		
It is incorporated ur State: <u>CA</u> Countr		
State. <u>CA</u> Counti		
	SECTION III	
The corporation is not transacting business in this state and surrenders its authority to transact business in this state.		
SECTION IV		
It revokes the authority of its agent in this state to accept service of process. It confirms the authority of the Secretary of State of the State of Rhode Island to accept service of process with respoect to claims for relief or causes of action arising out of the transaction of business in Rhode Island.		
	SECTION V	
The post office address to which the Rhode Island Department of State may mail a copy of any service of process against the corporation that is served on the RI Department of State:		
	3300 WASHTENAW AVENUE	
	<u>SUITE 280</u> ANN ARBOR State: <u>MI</u> Zip: <u>48104</u> Cour	ntry: <u>USA</u>
SECTION VI		
The corporation certifies that it has no outstanding tax obligations. As required by RIGL 7-1.2-1413, the corporation has paid all fees and taxes. [Note: tax status can be verified by emailing tax.collections@tax.ri.gov.]		
SECTION VII		
If the corporation is in the hands of a receiver or trustee, this Application for Certificate of Withdrawal must be executed on behalf of the corporation by the receiver or trustee.		

## SECTION VIII

This Application for Certificate of Withdrawal shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing

## Signed this 28 Day of January, 2025 at 9:52:35 AM by an authorized officer of the

**corporation.** This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2

By <u>KATE KATZ</u> Signature of Authorized Officer of the Corporation

Form No. 154 Revised 09/07

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

January 28, 2025 09:50 AM

Treng M. Course

Gregg M. Amore Secretary of State

