

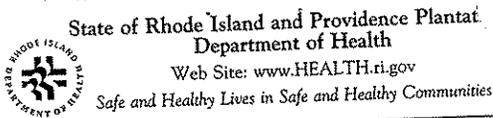
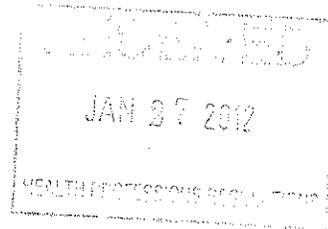
To The Rhode Island Department of Nursing:

I am surrendering my nursing license as of 1/23/2012 with no intent of working in healthcare in the future. I have not worked as an RN since 1/18/2012. I will no longer work as a registered nurse in Rhode Island or any other state.

I have both faxed this notification as well as mailed the original with my license enclosed in the envelope.

Jennifer Cohen, RN 50027
505 - 917 - 6309

Thank you



JENNIFER RACHEL COHEN
Registered Nurse

RN50027 expires 03/01/2013