

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

- FIRST: The name of the corporation as currently filed with the Florida Department of State:
MENTAL HEALTH SOLUTIONS, P.A.
- SECOND: The document number of the corporation: P08000052115
- THIRD: The file date of the articles of incorporation: May 27, 2008
- FOURTH: None of the corporation's shares have been issued.
- FIFTH: No debt of the corporation remains unpaid.
- SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
- SEVENTH: A majority of the incorporators authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: MICHAEL MARKS, AGENT FOR LILIANA MARKS PSD
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED
Apr 25, 2017
Secretary of State

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

Name of Corporation:

MENTAL HEALTH SOLUTIONS, P.A.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

MENTAL HEALTH SOLUTIONS, PA. HAD CEASED OPERATIONS AS OF 12/31/2016. DISSOLUTION WAS DELAYED TO PRESENT DAY, AS AN EFFORT TO SEE IF ANY CLAIMS OF LIABILITY WOULD ARISE FROM ANY PARTIES. NONE ARE KNOWN, OR HAVE COME FORTH AS OF TODAY.

Mailing address where claims can be sent:

15715 S. DIXIE HWY.
SUITE # 303
PALMETTO BAY, FL 33157 US

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: MICHAEL MARKS, AGENT FOR LILIANA MARKS

Electronic Signature of the Person Filing