

P99000106484
CAREStaff

"The Home Care & Staffing Source"

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

200004732062--5
-12/19/01--01016--002
*****35.00 *****35.00

To Whom It May Concern:

Enclosed is a check for \$35.00 for filing of notice of dissolution of CareStaff, Inc.

Sincerely,

Robert D. Laufer
President

FILED
01 DEC 19 PM 12:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Betty GAVE
AUTHORIZATION BY PHONE TO
CORRECT date of adoption
DATE _____
DOC. EXAM. T. LEWIS DEC 27 2001

valid
T. LEWIS DEC 27 2001

□ 6400 NORTH DAVIS HIGHWAY, SUITE 7
PENSACOLA, FLORIDA 32504
850-475-9000 - 850-475-9330 (fax)

□ 808 DOWNTOWNER BOULEVARD, SUITE H
MOBILE, ALABAMA 36609
334-380-2070 334-380-2936 (fax)

www.care-staff.com.

ARTICLES OF DISSOLUTION

FILED
01 DEC 19 PM 12:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: CareStaff, Inc.

SECOND: The date dissolution was authorized: 12/10/01 effective 12/30/01

THIRD: Adoption of Dissolution (CHECK ONE)

- Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- Dissolution was approved by vote of the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

_____ (voting group)

Signed this 10th day of December, 2001.

Signature *R D Lanter*
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Robert D. Lanter
(Typed or printed name)

President
(Title)