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<u> </u>	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(======================================	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
Office Use Only	
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DOT DEC -3 AM II: 15
SECRETARY OF STATE
AMASSEF, FLORIDA

COVER LETTER

Division of Corporations	
SUBJECT: Comprehensive Care S	ervices, Inc.
	oration - must include suffix)
Dear Sir or Madam:	
	n for Authorization to Transact Business in Florida," d to register the above referenced foreign corporation to
Please return all correspondence concerning this n	natter to the following:
Chester Czaplicka	
(Nar	me of Person)
Comprehensive Care Services Inc	c
(Fire	m/Company)
31330 Schoolcraft Road	
	(Address)
Livonia MI 48150	
(City/S	State and Zip code)
For further information concerning this matter, ple	ease call:
Todd Kelley at (_7:	34 ₎ 971-8500
(Name of Person) (A	Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee &

2007 DEC -3 AH II: 15 SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 29, 2007

Department of State
Divisions of Corporations
Corporate Filings
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE Articles of Dissolution to dissolve a Florida profit corporation

Comprehensive Care Services, Inc. Document Number P07000127318 Incorporation date November 28, 2007

Dear Madam or Sir:

The above referenced entity was inadvertently incorporated on-line as a Florida profit corporation when in fact the entity is a Michigan profit corporation doing business in Florida. Therefore Comprehensive Care Services, Inc has attached to its Application by Foreign Corporation for Authorization to Transact Business in Florida Articles of Dissolution to dissolve the inadvertently filed Florida profit corporation referenced above. Furthermore by dissolving the Florida Corporation, it is respectfully requested that the name "Comprehensive Care Services, Inc." released and allowed to be used by the Michigan Corporation requesting authorization to transaction business in Michigan.

Sincerely,

Comprehensive Care Services Inc

By: Chester Czaplicka

It's President

Attachments: Articles of Dissolution

Foreign corporation doing business in FL application

Michigan Certified Certificate of Good Standing

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Comprehe	ensive Care Services, Inc					
	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	D,"	"COMPANY," "CORPORATION,"			
Comprehe	ensive Care of Florida					
(If name unavail	able in Florida, enter alternate corporate nam	ne a	dopted for the purpose of transacting busing	ess in Flori	ida)	
_{2.} Michigan	3	3 .	32-0078468			
	under the law of which it is incorporated)		(FEI number, if applicable)			
4, 5/22/03	s	5.	Perpetual			
**	e of incorporation)	· .	(Duration: Year corp. will cease to exist of	or "perpetua	ıl")	
_{.6.} 11/29/07						
	(SEE SECTIONS 607.1501 & 607.	15	Florida, if prior to registration) 02, F.S., to determine penalty liability)			:
_{7.} 31330 Scr	noolcraft Road, Livonia MI 4		The state of the s			
	(Principal office ad					
31330 Sch	noolcraft Road, Livonia MI 4	8	150			
· · · · · · · · · · · · · · · · · · ·	(Current mailing ac	ldr	ess)	SE	200	
	all lawful business			CRETA	2001 DEC	-1
(Purpose(s) of corporation authorized in home state or	CO	untry to be carried out in state of Florida)	ARY SSE	芯	
9. Name and street	et address of Florida registered agent: (P	O.	. Box NOT acceptable)		<u> </u>	1
Name:	Sean Murtha			STAT	A	N. Carrier
Office Address:	1849 Mariners Lane			Dr.	2	
	Weston		, Florida 33327			
	(City)		(Zip code)			

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

^{11.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Chester Czaplicka Address: 31330 Schoolcraft Road, Livonia MI 48150 Vice Chairman: _____ Address: Director: Patricia Fanelli Address: 31330 Schoolcraft Road, Livonia MI 48150 **B. OFFICERS** President: Chester Czaplicka Address: 31330 Schoolcraft Road, Livonia MI 48150 Vice President: Patricia Fanelli Address: 31330 Schoolcraft Road, Livonia MI 48150 Secretary: Patricia Fanelli Address: 31330 Schoolcraft Road, Livonia MI 48150 Treasurer: Chester Czaplicka Address: 31330 Schoolcraft Road, Livonia MI 48150 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director of Officer listed in number 12 of the application) 14. Chester Czaplicka, Presicent

(Typed or printed name and capacity of person signing application)



Lansing, Michigan

This is to Certify That

COMPREHENSIVE CARE SERVICES, INC.

a Michigan profit corporation was validly incorporated on May 22, 2003, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 29th day of November, 2007.

, Director

Bureau of Commercial Services