- 603562						
(Requestor's Name) (Address) (Address)	300269839473					
(City/State/Zip/Phone #)						
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	DEPARTMENT OF STATES HAY 13 AN IO: SCALLED FILED					
Office Use Only	L LEMIEUR					

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

<u>с</u>, т ۰.

ACCOUNT NO.	: I2000000195
REFERENCE	
AUTHORIZATION	Squel Eleman
COST LIMIT	· : \$ 35.00
ORDER DATE : May 12, 2015	
ORDER TIME : 8:46 AM	

ORDER NO. : 626928-005

CUSTOMER NO: 4983A

DOMESTIC FILINGS

NAME: SENIORS MANAGEMENT, INC.

XX ___ ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX ____ PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen - EXT# 62974

EXAMINER'S INITIALS:

COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: Seniors Management, Inc.

DOCUMENT NUMBER: G03562

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marilyn D. Adelman

(Name of Contact Person)

Cozen O'Connor

(Firm/Company)

1900 Market Street

(Address)

Philadelphia, PA 19103

(City/State and Zip Code)

For further information concerning this matter, please call:

Marilyn D. Adelman at (²¹⁵) <u>665-7241</u> (Area Code & Daytime Telephone Number) (Name of Contact Person)

Enclosed is a check for the following amount:

□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section **Division** of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section **Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

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

FIRST:	The name of the c	orporation as current	ly filed with th	he Florida De	partment of State:
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Seniors Management, Inc.

SECOND: The document number of the corporation (if known): G03562

THIRD: The date dissolution was authorized: ______

Effective date of dissolution if applicable:

(no more than 90 days after dissolution file date)

FOURTH: 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 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



