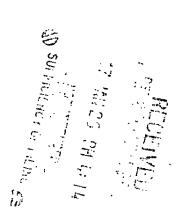
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Office Use Only



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R. Write

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

ACCOUNT NO. : I20000000195

REFERENCE : 480715 7864759

AUTHORIZATION :

COST LIMIT : \$0.5000 man

ORDER DATE : January 26, 2017

ORDER TIME : 12:50 PM

DOMESTIC FILINGS

NAME: VISITING HOME HEALTH SERVICES, 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: Melissa Zender - EXT#

ORDER NO. : 480715-010

CUSTOMER NO: 7864759

EXAMINER'S INITIALS:

COVER LETTER

TO: Amendment Section Division of Corporations Visiting Home Health Services, Inc. SUBJECT: DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joan Thurmond (Name of Contact Person) Life Care Centers of America, Inc. (Firm/Company) 3570 Keith Street, NW (Address) Cleveland, TN 37312 (City/State and Zip Code) For further information concerning this matter, please call: Joan Thurmond (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: 1 \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, □ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations** Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 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 corporation as currently filed with the Florida Department of State:		
	Visiting Home Health Services, Inc.		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: 12/31/16		
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
FOURTH	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast is was sufficient for approval.	for dissol	lution
	☐ 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:		17 JAN
	The number of votes cast for dissolution was sufficient for approval by		26
	(voting group)	F #*	P: 0.7
	Visiting Home Health Services, Inc.	4.0	-
	Signature: Dawlow A (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	<u> </u>	
	Joan E. Thurmond		
	(Typed or printed name of person signing)		
	Assistant Secretary		
	(Title of person signing)		

COVER LETTER

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

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