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Division of Corporations
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2018 APR 29 AM 8:00
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10-20-28
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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4/29/2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sunbelt Medical Supply, Inc.

DOCUMENT NUMBER: H41886

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

Please return all correspondence concerning this matter to the following:

Mark J. Dougherty

(Name of Contact Person)

Bound Tree Medical, LLC

(Firm/Company)

5000 Tuttle Crossing Blvd.

(Address)

Dublin, OH 43016

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark J. Dougherty

(Name of Contact Person)

at (614) 760-5018

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
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MAILING ADDRESS:

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

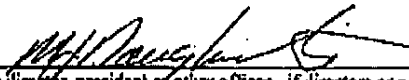
STREET ADDRESS:

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 corporation as currently filed with the Florida Department of State:
Sunbelt Medical Supply, Inc.
- SECOND: The document number of the corporation (if known): H41886
- THIRD: The date dissolution was authorized: April 28, 2010
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
- _____
(voting group)

Signature: 
(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)

Mark J. Dougherty
(Typed or printed name of person signing)

Treasurer and Secretary
(Title of person signing)

Filing Fee: \$35

10 APR 29 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Sunbelt Medical Supply, Inc.

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:

Information sufficient to bring a claim in this jurisdiction.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Sunbelt Medical Supply, Inc.

c/o Bound Tree Medical, LLC


5000 Tuttle Crossing Blvd.

Dublin, OH 43016

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.

Mark J. Dougherty, Treasurer and Secretary

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00