

J56116

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005

REFERENCE: 2020507
(Sub Account)

DATE: 11-24

000003054040--5

REQUESTOR NAME: LEXIS

ADDRESS:

TELEPHONE:

() () ext ()

CONTACT NAME:

CORPORATION NAME: Home Care Pharmacy, Inc. 12/31/99

DOCUMENT NUMBER:
(if applicable)

AUTHORIZATION:

C. Woodyard

☐ CERTIFIED COPY (1-9)

☒ CERTIFICATE OF STATUS (1-9)

☒ PLAIN STAMPED COPY

☒ Call When Ready
☒ Walk In
☐ Mail Out

☐ Call if Problem
☐ Will Wait

☐ After 4:30
☐ Pick Up

FILED
99 NOV 29 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
99 NOV 24 PM 12:04
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

*00789, 00721, 00672

DOJ
11/30/99



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

November 29, 1999

Lexis Document Services Inc.
3953 WW Kelley Rd.
Tallahassee, FL 32311

SUBJECT: HOME CARE PHARMACY, INC. OF FLORIDA
Ref. Number: J56116

*Corrected
Please date
11/29/99
Thank you*

We have received your document for HOME CARE PHARMACY, INC. OF FLORIDA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

If you have any questions concerning the filing of your document, please call (850) 487-6907.

Annette Ramsey
Corporate Specialist

Letter Number: 899A00056289

RECEIVED
NOV 30 AM 3:44
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

ARTICLES OF DISSOLUTION

12/31/99

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

FILED
99 NOV 29 PM 1:15
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is: Home Care Pharmacy, Inc. of Florida

SECOND: The date dissolution was authorized: November 4, 1999 to be effective 12/31/99

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 22nd day of November, 1999

Signature

Roch Cater, VP
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Roch Cater

(Typed or printed name)

Assistant Secretary

(Title)