



The PM Group • Gulf Coast, Inc.

589914

Jan. 2, 1998

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

200002405602--8  
-01/20/98--01162--013  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

RE: Physicians Home Care of Northwest Florida Inc.  
Tax ID # 59-2838602

Gentlemen:

I, Michael C. Angus, have been authorized by the above named corporation to act on their behalf and file the appropriate papers and filing fees to dissolve the corporation.

Any further information and/or inquiries should be directed to my attention at the address on the bottom of this page.

Respectfully Submitted,

Michael C. Angus  
PM Group-Gulf Coast Inc.

FILED  
98 FEB 11 PM 12:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Vol. Diss. Doc 2/11



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

January 23, 1998

MICHAEL C. ANGUS  
THE PM GROUP - GULF COAST, INC.  
6108 VILLAGE OAKS DRIVE  
PENSACOLA, FL 32504

SUBJECT: PHYSICIANS' HOME CARE OF NORTHWEST FLORIDA, INC.  
Ref. Number: J89914

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

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6908.

Teresa Brown  
Corporate Specialist

Letter Number: 498A00003838

## ARTICLES OF DISSOLUTION

98 FEB 11 PM 12:37  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

FIRST: The name of the corporation is: PHYSICIANS' HOME CARE OF NORTHWEST FLORIDA, INC.

TAX ID #59-2838602

SECOND: The date dissolution was authorized: DECEMBER 1, 1997

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 15TH day of DECEMBER, 19 97

Signature

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

MICHAEL C. ANGUS

Steven P Espy

(Typed or printed name)

ACCOUNTANT

Chief Operating Officer

(Title)