

Accessible Housing, Inc.

1820 S.W. 100th Ave. • Miramar FL 33025 Phone (954) 442-8884 • 888-431-RAMP (7267) • Fax (954) 432-5858 www.accessrehab.com

L95367

200002847632--1

-04/22/99--01075---006

#***35.00 *****35.00

Date: April 20, 1999

To: Department of State

Division of Corporations

Please find enclosed our Dissolution of this corporation in the Amended Articles of Incorporation.

Our return address is the same as that stated on this letterhead. Our phone number is the same as that stated on this letterhead.

Sincerely,

Kathleen Moreo, President

5-13-99 5-13-99 99 MAY 12 PM 4: 42
SECRETARY OF STATE
TALLAHASSEE, FLORID



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 27, 1999

RECEIVED MAY 0 3 1999

ACCESSIBLE HOUSING, INC. ATTN: KATHLEEN MOREO 1820 S.W. 100TH AVENUE MIRAMAR, FL 33025

SUBJECT: ACCESSIBLE HOUSING, INC.

Ref. Number: L95367

We have received your document for ACCESSIBLE HOUSING, 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 487-6957.

Doug Spitler Document Specialist

Letter Number: 599A0002223

99 MAY 12 PH 4: 42

PRECEIVED

99 MAY 12 MI 8: 35

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 is: ACCESSIBLE HOUSING INC.	
SECOND:	The date dissolution was authorized: MAY 7, 1999	
THIRD:	Adoption of Dissolution (CHECK ONE)	
	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.	
☐ Diss	olution was approved by vote of the shareholders through voting groups.	
	The following statement must be separately provided for each voting group to the plan to dissolve:	173
The	number of votes cast for dissolution was sufficient for approval by	
	(voting group)	
Signe	ed this 6 day of MAY, 19 99 E	-
Signature _	(By the Chairman or Vice Chairman of the Board, President, or other officer)	:
	KATNLEEN MOREO (Typed or printed name)	-
	PRSSIDENT + REGISTERED AGENT	