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REPORATIONS



ACCOUNT NO. : 072100000032

REFERENCE: 101725 4390339

AUTHORIZATION : Oticia ()

COST LIMIT : \$ 35.00

ORDER DATE: May 21, 2003

ORDER TIME : 11:31 AM

ORDER NO. : 101725-015

CUSTOMER NO: 4390339

CUSTOMER: Ms. Susan Lester

Caremark Rx, Inc.

Suite 1000

3000 Galleria Tower Birmingham, AL 35244

DOMESTIC FILINGS

NAME: HOME HEALTH AGENCY OF GREATER

MIAMI, INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT# 1155

EXAMINER'S INITIALS:

FILED

ARTICLES OF DISSOLUTION

	section 607.1403, Florida Statutes, this Florida profit corporation submits the rticles of dissolution:		
FIRST:	The name of the corporation is: Home Health Agency of Greater Miami, Inc 24		
SECOND:	The date dissolution was authorized: May 16, 2003		
THIRD:	Adoption of Dissolution (CHECK ONE)		
was Dis T e	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval. solution was approved by vote of the shareholders through voting groups. The following statement must be separately provided for each voting group intitled to vote separately on the plan to dissolve: number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
Sig	ened this		
Signature _	(By the Chairman or Vice Chairman of the Board, President, or other officer) Sara J. Finley (Typed or printed name)		
	Vice President and Secretary		
	(Title)		