

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 12C16C000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

LLC DISSOLUTION OR WITHDRAWAL
MCARE SOLUTIONS, LLC

Certificate of Status	0
Certified Copy	1
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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

MCARE SOLUTIONS, LLC

(Name of limited liability company)

TEXAS

(Jurisdiction of its organization)

11/14/2017

(Date registered with Florida Department of State)

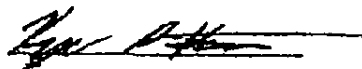
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(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)
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(Signature of authorized representative)

Kyle Hicok

(Typed or printed name of signee)

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