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To:

Division of Corporations  
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From:

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Account Number : FCA000000023  
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FLORIDA DEPARTMENT OF STATE  
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TALLAHASSEE, FLORIDA

**DISSOLUTION OR WITHDRAWAL  
CEDARCARE, INC.**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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JUL 09 2015  
TALLAHASSEE  
FLORIDA DEPARTMENT OF STATE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cedarcare, Inc.

**DOCUMENT NUMBER:** M54324

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ceci Estill

(Name of Contact Person)

Cedarcare, Inc.

(Firm/Company)

One Park Plaza - Legal Dept.

(Address)

Nashville, TN 37203

(City/State and Zip Code)

For further information concerning this matter, please call:

Ceci Estill

at ( 615 )

344-2994

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |
|---|--|---|---|

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## 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 as currently filed with the Florida Department of State:

Cedarcare, Inc.

SECOND: The document number of the corporation (if known): M54324

THIRD: The date dissolution was authorized: 07-01-2015

Effective date of dissolution if applicable: 07-08-2015

(no more than 90 days after dissolution file date)

FOURTH: 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 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)

Signature: Natalie H. Cline

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Natalie H. Cline

\_\_\_\_\_  
(Typed or printed name of person signing)

Vice President and Secretary

\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35**

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