

TRANSMITTAL LETTER

NO1000004065

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

SUBJECT: Jones Quality Care Services Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000004460720--8
-07/05/01--01094--015
*****35.00 *****35.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Marilyn Lavern Jones
Name (Printed or typed)

112 S. Robbins Drive
Address

West Palm Beach, FL 33409
City, State & Zip

(561) 684-1978
Daytime Telephone number

FILED
01 JUL -6 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is Jones Quality Care Services, Inc

SECOND: The articles of incorporation were filed on June 11, 2001

THIRD: The corporation has not commenced to conduct its affairs.

FOURTH: No debts of the corporation remain unpaid.

FIFTH: Adoption of dissolution (CHECK ONE)

(Note: Cannot be authorized by an incorporator if the corporation has directors)

- ☒ The dissolution was authorized by a majority of the directors:
OR
☐ The dissolution was authorized by an incorporator.
☐ The dissolution was authorized by a majority of the incorporators.

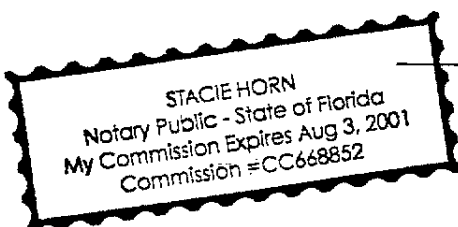
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01 JUL -6 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 2nd day of July, 2001

Signature Marilyn L. Jones
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer - if Directors have not been selected by an incorporator.)

Marilyn L. Jones
Typed or printed name

Provider / Director
Title



On this 2nd day of July 2, 2001 Marilyn Jones
appeared before me. Stacie Horn
STACIE HORN