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Betty L. Gamel 1280 22nd Ave. N. Naples, FI 34103-4808

Department of State State of Florida Division of Corporations P.O. Box 6377 Tallahassee, FI 32314

SUBJECT: HEALTH MINISTRIES AND PARISH NURSING OF SOUTH FLORIDA,

INC.

Enclosed you will find request for dissolution of the above named organization.

Additionally you will find enclosed a check in the amount of \$43.75 for the following:

Filing Fee \$35.00 Certified Copy of the dissolution \$8.75

The information may be sent to me:

Betty L. Gamel 1280 22nd Ave. N. Naples, Fl 34103-4818

Phone:

239 263-7507

Thank you for your assistance in processing this request.

Sincerely yours,

Betty L. Camel

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 HEALTH MINISTRIES AND F of South Florida, INC.	ARISH NURSING
SECOND: The articles of incorporation were filed on Oct 1, 2001	
THIRD: The corporation has not commenced to conduct its affairs.	
FOURTH: No debts of the corporation remain unpaid.	Ās O
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: QR I he dissolution was authorized by an incorporator.	FILED BMAY 15 PM 2: 45 ECRETARY OF STATE LLAHASSEE, FLORIT
☐ The dissolution was authorized by a majority of the incorporators.	W
Signed this 13th day of MAY	<u>3</u>
Signature (By the Chairman or Vice Chairman of the Board of Directors, Proofficer - if Directors have not been selected by an incorporator.) BETTY L. GAMEL Typed or printed name	esident or other
Title	