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Division of Corporations
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From:

Account Name : STEPHEN S. MATHISON, P.A.
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**DISSOLUTION OR WITHDRAWAL
HOSPICE OF PALM BEACH COUNTY FOUNDATION, INC.**

Certificate of Status	0
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**ARTICLES OF DISSOLUTION
OF
HOSPICE OF PALM BEACH COUNTY FOUNDATION, INC.**

The undersigned, a natural person of legal age, the President of Hospice of Palm Beach County Foundation, Inc., for the purpose of dissolving the corporation in accordance with the Florida Corporation Not For Profit Act, Chapter 617, Florida Statutes, hereby subscribes to, acknowledges and adopts the following Articles of Dissolution.

ARTICLE I

Name

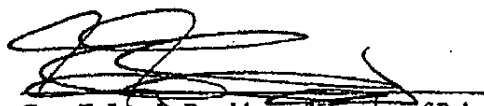
The name of the corporation is HOSPICE OF PALM BEACH COUNTY FOUNDATION, INC.

ARTICLE II

Dissolution Authorized

Dissolution of the corporation, effective as of the filing hereof, was authorized by unanimous vote of the Board of Directors at a meeting held Nov. 17, 2009. The Corporation has no members. The resolution of the Directors of the corporation has been duly filed in the minutes of director proceedings and that is sufficient for approval of dissolution of the corporation.

IN WITNESS WHEREOF, I, the undersigned, for the purpose of dissolving a Florida Corporation Not For Profit under the laws of the State of Florida, make and file these Articles of Dissolution effective upon filing hereof, hereby declaring and certifying that the facts herein stated are true, and hereunto set my hand and seal this 20 day of November, 2009.


Greg E. Leach, President of Hospice of Palm
Beach County Foundation, Inc.

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ARTICLES OF DISSOLUTION
HOSPICE OF PALM BEACH COUNTY FOUNDATION, INC.
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STATE OF FLORIDA

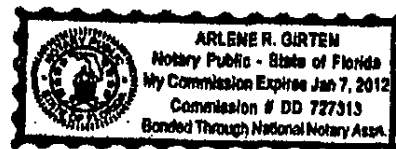
COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, personally appeared Greg E. Leach, President of Hospice of Palm Beach County Foundation, Inc., ☒ to me well known, or ☐ identified to me by _____, to be the individual described in and who has executed the foregoing Articles of Dissolution, and he acknowledged before me that he executed the same for the purposes therein expressed pursuant to duly adopted corporate resolution.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal at Palm Beach Gardens, Florida, this 20 day of November, 2009.

Arlene R. Gerten
Notary Public, State of Florida
Notary Printed Name: ARLENE R. GERTEN
My commission expires: 1-7-2012
My commission number: DD-727313

(NOTARY SEAL)



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