

N99000002453

ENGLANDER FISCHER  
ATTORNEYS

721 First Avenue North St. Petersburg, Florida 33701

☐ PICK-UP ☐ WAIT ☐ MAIL

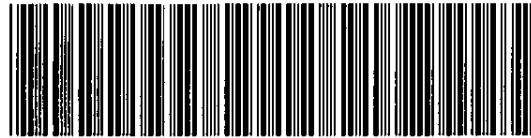
(Business Entity Name)

(Document Number)

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10/20/11--01010--024 \*\*113.75

FILED  
2011 OCT 20 PM 1:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D.S. w/Notice

TBrawn 10-21-11

FILED  
2011 OCT 20 PM 1:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:  
LIFETIDES HOME, INC.

SECOND: The document number of the corporation (if known): N99000002453

THIRD: Adoption of Dissolution  
**(COMPLETE SECTION I OR II)**

### SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

- ☒ The date of the meeting of members at which the resolution to dissolve was adopted  
October 6, 2011. The number of votes cast by the  
members was sufficient for approval.
- ☐ The resolution was adopted by written consent of the members and executed in  
accordance with section 617.0701, Florida Statutes.

### SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was \_\_\_\_\_.

The number of directors in office was \_\_\_\_\_ and the vote for resolution was

\_\_\_\_\_ for and \_\_\_\_\_ against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: Date of Filing Articles of Dissolution  
(no more than 90 days after dissolution file date)

Signature Sue Gimeno  
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

SUE GIMENO  
(Typed or printed name of the person signing)

Director  
(Title of person signing)

**FILING FEE: \$35**

## Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: LIFETIDES HOME, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Name, address, email and telephone number of claimant.

Nature of claim, including the date of claim and amount of claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Lifetides Home, Inc.

3438 East Lake Rd.

Suite 14 PMB 650

Palm Harbor, FL 34685

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

SUE GIMENO

Printed Name of the Person Filing

Sue Gimeno

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00