P00000097300

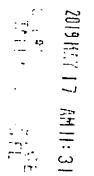
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R WHITE
JUL 1 5 2019

COVER LETTER

TO: Amendment Section Division of Corporations

APRIL 30,2

NAME OF CORPORATION: WOMENCARE I	NC
DOCUMENT NUMBER: P00000097300	
The enclosed Articles of Revocation of Dissolut	
Please return all correspondence concerning this	matter to the following:
VICKIE GAYLE	
Name of C	Contact Person
WOMENCARE INC	
Firm	/Company
930 LAKE BALDWIN LANE	
A	ddress
ORLANDO, FL 32814	
City/State	and Zip Code
VGAYLE@BRENDABARRYMD.COM	
E-mail address: (to be used fo	r future annual report notification)
For further information concerning this matter, p	olease call:
VICKIE GAYLE	407 645-5595 At ()
Ö Kanne of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$35 Filing Fee Securificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) ☐ \$62.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclose
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



June 6, 2019

VICKIE GAYLE 930 LAKE BALDWIN LN ORLANDO, FL 32814

SUBJECT: WOMENCARE, INC. Ref. Number: P00000097300

We have received your document for WOMENCARE, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist III

Letter Number: 019A00011329

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404. Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective d of the Articles of Dissolution:

FIRST:	The name of the corporation is: WOMENCARE INC			_	
SECOND:	The document number of the corporation (if known) is				
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution				
	filed with the Florida Department of State is Note: If the date inserted in this block does not meet the applicable statutory filing not be listed as the document's effective date on the Department of State's records.	rcquirem	ents, th	is date	
FOURTH:	The Revocation of Dissolution was authorized on 2/8/2019	<u>.</u>			
FIFTH:	Adoption of Revocation of Dissolution (check one)				
	 □ The board of directors revoked the dissolution. □ The incorporators revoked the dissolution authorized by the sharevocation was permitted by action by the board of directors alone pauthorization. □ The shareholders revoked the dissolution and the number of votes capproval. □ The shareholders revoked the dissolution by voting groups - the number of votes of approval. □ Was sufficient for approval. 	oursuam ast was	t to the	at rient f	
SIXTH:	A copy of the Articles of Dissolution is attached.				
	Signature (By a director, president of 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) VICKIE GAYLE (Typed or printed name of person signing) VICE PRESIDENT	TALL STATE	2019 MEY 17 AM II: 31	199	
	(Title of person signing)				

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST:

The name of the corporation as currently filed with the Florida Department of State:

WOMENCARE, INC.

SECOND:

The document number of the corporation: P00000097300

THIRD:

The file date of the articles of incorporation: October 13, 2000

FOURTH:

None of the corporation's shares have been issued.

FIFTH:

No debt of the corporation remains unpaid.

SIXTH:

The net assets of the corporation remaining after winding up have been distributed to

the shareholders, if shares were issued.

SEVENTH:

A majority of the incorporators authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, Florida Statutes.

Signature: VICKIE GAYLE

VP BUS MGR

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative