P01000038345

(Req	uestor's Name)	
(Add	ress)	
		·
(Addı	ress)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Doc		·
(1000)	intent (vultiber)	l
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	
-		

Office Use Only



200194733522

02/18/11--01008--004 **35.00

TALLAHASSEE, FI OF IN

20/11

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution of Corporation		
DOCUMENT NUMBER: P01000038345		
The enclosed Articles of Dissolution and fee are submitted fo	or filing.	
Please return all correspondence concerning this matter to the	following:	
Nanette O'Donnell, P.A.		
(Name of Contact Person)		
Duane Morris LLP		
(Firm/Company)		
200 S. Biscayne Blvd., Suite 400		
(Address)		
Miami, FL 33131		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Nanette O'Donnell at (305	960-2264	
(Name of Contact Person) (Area C	ode & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
▼\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	ee & \$\sumsymbol{\sum}\sin\sin\sin\sin\sin\sin\sin\sin\sin\sin	
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

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	Procare Management & Financial Network Incorporated		
SECOND:	The document number of the corporation (if known): P01000038345		
THIRD:	The date dissolution was authorized: January 1, 2011		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution	n file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution	
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled	
	The number of votes cast for dissolution was sufficient for approval by	11 FEB I SECRETAI TALLAHAS	
	(voting group)	8 PH	
	Signature: (By a director, president or 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)	F STATE FLORIDA	
	Leyda Torres		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

Filing Fee: \$35