

PO1000045011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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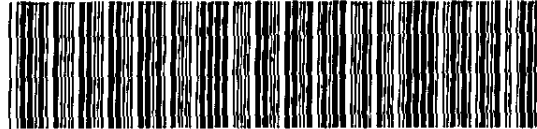
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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7/20

M. MARTIN EDRY, CPA
201 Raymond Place
Staten Island, NY 10310
TEL 718-998-5656
FAX 718-818-0016

July 12, 2005

To: Florida Department of State

Enclose Article of Dissolution for DBA Medical Rehabilitation Center, Inc.

Please mail Dissolution Certificate of Status to the above address.

Sincerely,

A handwritten signature in black ink, appearing to read 'M. Edry', followed by a long horizontal line that curves upwards at the end.

M .Martin Edry, CPA

ARTICLES OF DISSOLUTION

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

FIRST: The name of the corporation is:

D B A MEDICAL REHABILITATION CENTER, INC.

SECOND: The date of dissolution was authorized: 12/30/02

THIRD: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by vote of the shareholders through voting groups.


The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signed this 01 day of JULY, 2005

Signature


(By the Chairman or Vice Chairman of the Board, President, or other officer)

BORIS BORSKY

(Typed or printed name)

PRESIDENT

(Title)

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