

PO2000111884

(Requestor's Name)

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(City/State/Zip/Phone #)

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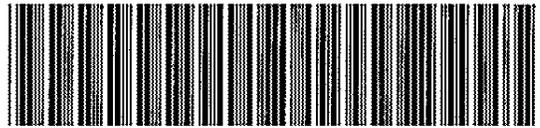
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PO2000111884
33 FLD 10-31-02
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TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: COMPREHENSIVE ADDICTIONS TREATMENT SVCS, INC.
Name of Corporation

Enclosed are an original and one (1) copy of the articles of dissolution and a check for \$35.00 \$43.75 \$52.50
Filing Fee Filing Fee Filing Fee
& Certificate of Status Certified Copy
Certificate of Status

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TALLAHASSEE, FLORIDA

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FROM: Bonnie L. Richardson & Associate
Name

13800 S. Magnolia Avenue
Address

Ocala, Florida 34473
City, State & Zip Code

(352) 307-0249
Daytime Telephone Number

ARTICLES OF DISSOLUTION

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: Comprehensive Addictions Treatment SVCS I.

SECOND: The filing date of the articles of incorporation was: 10/17/2002

THIRD: (CHECK ONE)

None of the corporation's shares have been issued.

The corporation has not commenced business.

FOURTH: No debt of the corporation remains unpaid.

FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SIXTH: Adoption of Dissolution (CHECK ONE)

A majority of the incorporators authorized the dissolution.

A majority of the directors authorized the dissolution.

Signed this 29th day of October, 2002.

Signature Sally Campbell Anker
(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)

SALLY CAMPBELL ANKER
(Typed or printed name)

DIRECTOR / Incorporator
(Title)

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