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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: article of Disc	solution for Home Nursing S.
DOCUMENT NUMBER:PO300	0048223
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
GRACIE/2 AM (Name of Co	ntact Person)
(Firm/C	Company)
13921 SW 38 Th 7	ERRACE
13921 SW 38 Th 7	ress)
MIAMI.	FloriDA 33175
(City/State a	and Zip Code)
For further information concerning this matter	, please call:
"GRACE"	
GRACIE/2 AMOR	at (305) 570 8235
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
	\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certified Copy Certificate of Status & Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 13, 2005

GLOBAL CARGO BROKERS P.O. BOX 831720 MIAMI, FL 33283-1720

SUBJECT: HOME NURSING SOLUTIONS, INC.

Ref. Number: P03000048223

We have received your document for HOME NURSING SOLUTIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6964.

Letter Number: 405A00062434

Irene Albritton Document Specialist

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ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:
	HOMENURSING SOLUTIONS INC.
SECOND:	The document number of the corporation (if known): PO3000048223
THIRD:	The file date the articles of incorporation: $\frac{5/1/2003}{2003}$
FOURTH:	(CHECK AT LEAST ONE BOX)
	The file date the articles of incorporation:
	☐ The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Signa	Acceptations (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.) CRACIES AMOR (Typed or printed name of person signing) PRESIDENT PIRECTOR/OFFICER (Title of Person Signing)

Filing Fee: \$35