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FILED
03 JUL 16 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dissolution
11/8/03
Jm

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

July 11, 2003

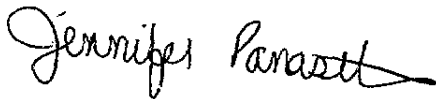
To Whom It May Concern,

I would like to dissolve my corporation called Optimal Care Rehabilitation, Inc. and obtain a limited liability company entitled, Optimal Care Rehabilitation, LLC.

I have enclosed both the articles of dissolution for the corporation, the articles applying for the limited liability company and 2 separate checks. If you have any questions please call me at 954-673-8979 any time.

Thank you for your time. It is greatly appreciated.

Sincerely,

A handwritten signature in cursive script that reads "Jennifer Panaseth". The signature is written in dark ink and is positioned above the printed name and address.

Jennifer Panaseth
9463 NW 42nd Street
Sunrise, Fl 33351

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: Optimal Care Rehabilitation, Inc.

SECOND: The filing date of the articles of incorporation was: 7/01/03

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 11 day of July, 2003

Signature

Jennifer Panaseth

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

Jennifer Panaseth

(Typed or printed name)

Director and incorporator

(Title)

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