

P03000136349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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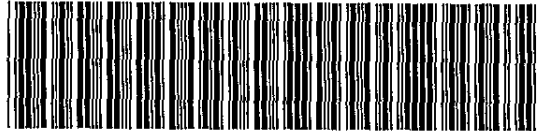
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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LAW OFFICES OF  
**ISAAK & ZWIRN, P.A.**  
2102 W. CASS ST.  
SUITE 200  
TAMPA, FLORIDA 33606  
(813) 871-1384  
(813) 849-1368 (fax)

EILAM ISAAK  
JEFFREY J. ZWIRN  
CHARLES W. ARLINE

CRIMINAL LAW  
PERSONAL INJURY

September 14, 2005

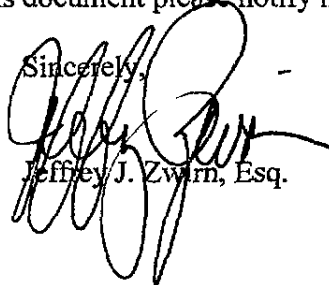
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: ADVCARE INC.  
Document No.: P03000136349

Dear Sir or Madam:

Enclosed for filing with your section is Advcare Inc.'s executed Articles of Dissolution. I have also enclosed the required filing fee of \$35.00 made payable to Department of State. If there are any problems with the filing of this document please notify my office immediately.

Sincerely,



Jeffrey J. Zwirn, Esq.

Encl.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Advcare Inc.

**DOCUMENT NUMBER:** P03000136349

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey Zwirn

(Name of Contact Person)

Isaak & Zwirn, P.A.

(Firm/Company)

2102 W. Cass St., Ste. 200

(Address)

Tampa, FL 33606

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey Zwirn, Esq.

(Name of Contact Person)

at ( 813 ) 871-1384

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**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

FROM :

FAX NO. : 8138491368

Sep. 14 2005 01:35PM P2

### 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:

Advicare Inc.

SECOND: The document number of the corporation (if known): P03000136349

THIRD: The date dissolution was authorized: September 1, 2005

Effective date of dissolution if applicable: \_\_\_\_\_  
(no more than 90 days after dissolution file date)

FOURTH: 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 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)

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)

Guy Decker  
(Typed or printed name of person signing)

Officer/Director  
(Title of person signing)

Filing Fee: \$35

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