

P03000153437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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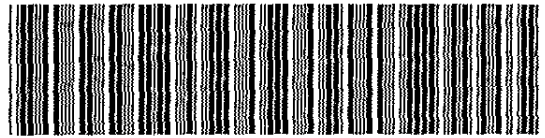
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. C. C. APR 02 2004

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISSOLUTION

**DOCUMENT NUMBER:** PO 2000153437

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

Please return all correspondence concerning this matter to the following:

MIRTHA E. VASQUEZ  
(Name of Person)

ALWAYS HEALTH CARE MEDICAL CENTER, INC  
(Name of Firm/Company)

15048 S.W. 104 ST. APT. 1911  
(Address)

Miami, FL 33196  
(City/State/and Zip Code)

For further information concerning this matter, please call:

MIRTHA E. VASQUEZ at (786) 443 4739  
(Name of Person) (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, Florida 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## 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 Department of State:  
ALWAY HEALTH CARE MEDICAL CENTER, INC

SECOND: The document number of the corporation (if known): PD 3000153437

THIRD: The file date of the articles of incorporation was: 03/25/04

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: 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.

Signed this 25 day of March, 2004

Signature: M. E. Vazquez

(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.)

MIRTHA E. VAZQUEZ

(Typed or printed name of person signing)

PRESIDENTE

(Title of person signing)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$35