

P04000076367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

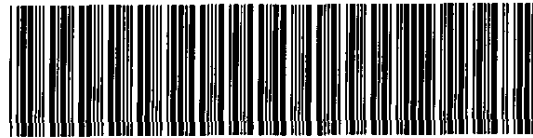
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JUL 13 PM 1:22

B. McKnight JUL 19 2006

BASIC ACCOUNTING SERVICES INC.

Requestor's Name

692 W. 29 St. Ste #9

Address

Hialeah

Florida

33012

City

State

Zip

305 887 4185

Phone#

CORPORATION NAME

SUNSHINE Health Care & Rehab Center Inc

() PROFIT CORPORATION

() NON PROFIT CORPORATION

() LIMITED PARTNERSHIP

() ANNUAL REPORT

() RESERVATION

() REINSTATEMENT

() OTHER

DISSOLUTION

() CERTIFIED COPY

() PHOTO COPIES

() CERTIFICATE
UNDER SEAL

() WALK IN

() WILL WAIT

() MAIL OUT

() CALL

() AFTER 30

Name

Availability

Document

Examiner

Updater

Updater

Verifier

Acknowledgment

W.P. Verifier

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: SUNSHINE HEALTH CARE & REHAB CENTER, INC. P04000076367

SECOND: The filing date of the articles of incorporation was: 5-11-04

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 10 th day of July 2006

Signature

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

JAMES J. DIEPPA

(Typed or printed name)

PRESIDENT

(Title)

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