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SECRETARY OF STATE ALLAHASSEE, FLORIDA

AND 155 Mandala

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Sunny Days of Broward	CMHC, Inc.
DOCUMENT NUMBER: <u>P04 0000 92547</u>	
The enclosed Articles of Dissolution and fee are submitted for f	iling.
Please return all correspondence concerning this matter to the following	llowing:
Eloyris Romanach (Name of Contact Person)	
,	_
SD of Broward CNHC, I (Firm/Company)	Inc.
P. O. Box 1852 (Address)	
Miami, FL 33233 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Floyis Romanach at (305) (Name of Contact Person) (Area Cod	904-10783 e & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$	Certificate of Status &
	FREET ADDRESS: mendment Section
Division of Corporations D	ivision of Corporations lifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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:
	Sunny Days of Broward CNHC, Inc.
SECOND:	The document number of the corporation (if known): P040000 92 547
THIRD:	The file date of the articles of incorporation:
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.
	ANIO: 17
Sign	ature:
•	(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.)
	Elayris Romanach (Typed or printed name of person signing)
	President (Title of Person Signing)

Filing Fee: \$35