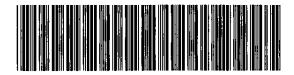
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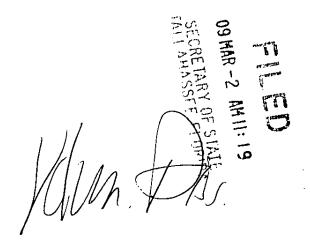
Office Use Only



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01/05/09--01100--006 **25.00

03/03/09--01003--019 **30.00



3/3/19 De



January 15, 2009

NATALIYA SONIS 1174 ARTHUR STREET HOLLYWOOD, FL 33019

SUBJECT: HOLLYWOOD REHABILITATION CENTER, INC.

Ref. Number: P04000107526

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

There is a fee of \$10.00 due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-8906.

Darlene Connell Regulatory Specialist II

Therefore of Corporations - P.O. BOY (1997) and assume Floriday 7.03 anno 177 upo

Letter Number: 409A00001557

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: HOLLYWOOD REHABILI	TATION CENTER, INC.	***************************************
DOCUMENT NUMBER: P04000107	526	, <u>.</u>
The enclosed Articles of Dissolution and	l fee are submitted for filin	g.
Please return all correspondence concerni	ing this matter to the follow	ving:
NATALIYA SONIS		
(Name o	of Contact Person)	_ -
HOLLYWOOD REHABILITATION CEI	NTER, INC.	
(Fi	rm/Company)	
1174 ARTHUR STREET		
(Address)	
HOLLYWOOD, FL 33019		
(City/S	tate and Zip Code)	
For further information concerning this m	natter, please call:	
NATALIYA SONIS	at () 73	80-0055
(Name of Contact Person)	(Area Code &	Daytime Telephone Number
Enclosed is a check for the following amo	ount:	
■\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	2 \$\Bigs \\$43.75 \text{ Filing Fee & Certified Copy (Additional copy is enclosed)}	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAU INC ADDRESS	\$TD	FFT ADDDFSS:

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

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 Depart HOLLYWOOD REHABILITATION CENTER, INC.	ment of	State	:
SECOND:	The document number of the corporation (if known):			
THIRD:	The file date of the articles of incorporation:	- - 2%	09	
FOURTH:	(CHECK AT LEAST ONE BOX)	CRET	MAR	A F
	None of the corporation's shares have been issued.	ARY O	-2 A	TT TT
	The corporation has not commenced business.	FINA	HII: 119	
FIFTH:	No debt of the corporation remains unpaid.	100	.	
SIXTH:	The net assets of the corporation remaining after winding up have been to the shareholders, if shares were issued.	distribu	ıted	
SEVENTH:	Adoption of Dissolution (CHECK ONE)			
	A majority of the incorporators authorized the dissolution.			
	A majority of the directors authorized the dissolution.			
Sign	ature: (By a director, president or other officer - if directors or officers have not been selected, in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	by an incor	porator	- if
	NATALIYA SONIS (Typed or printed name of person signing)	_		
	PLESIDENT (Title of Person Signing)	_		

Filing Fee: \$35