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NOLLY SECTION OF COMPANY AND INCIDENT 05 NAY 20 AM II: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LAZARUS CORPORATE FILING SERVICE

3320 SW 87 TH AVENUE	
MIAMI, FL 33165 (305) 552-5973	·
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CORPORATION NAME(S) & DOCUMENT NUM	•
FLORIDA LIFE MEDICA	L CENTER INC.
(Corporation Name) (I	Jocument #)
Corporation Name) (I	Document #)
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(Corporation Name) (I	Document #)
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	Document #)
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NEW FILINGS AMEND	MENTS
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	gnation of R.A., Officer/Director age of Registered Agent
Domestication Disso	olution/Withdr. wal
Other Merg	ger
OTHER FILINGS REGIST	RATION/QUALIFICATION
Annual Report	<u> </u>
	ted Partnership statement
Trade	emark .
Ŭ Other	r

Examiner's Initials

	ARTICLES OF DISSOLUTION OS FILE	
Pursuant to articles of d	section 607.1401, Florida Statutes, this Florida profit corporation subnates the followingon is solution:	
FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	FLORIDA LIFE MEDICAL CENTER I, IN	
SECOND:	The document number of the corporation (if known):	
THIRD:	The file date the articles of incorporation: $1/20/2005$	
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.	
Si	gned this 19 day of MAY, 2005.	
Signa	(By a director, fresident 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.)	
LEANDRO H. A COSTA. (Typed or printed name of person signing)		
	PIZESIDENT . (Title of person signing)	
	#= ar Emanar Droven	

Filing Fee: \$35