

PO6000037413

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

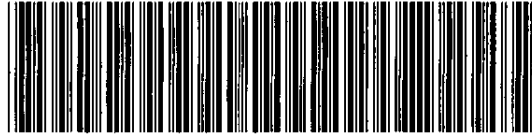
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Dissolution to dissolve Florida Profit
Corporation :: LifeQuest Rehabilitation, INC

DOCUMENT NUMBER: PO6000037413

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

Please return all correspondence concerning this matter to the following:

Raymond Urquiza

(Name of Contact Person)

LifeQuest Rehabilitation, INC.

(Firm/Company)

20273 SW 97th Court

(Address)

Miami, FL 33190

(City/State and Zip Code)

For further information concerning this matter, please call:

Raymond Urquiza

(Name of Contact Person)

at (305) 254-4706

(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

STREET ADDRESS:
Amendment Section

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:

Life Quest Rehabilitation, Inc

SECOND: The document number of the corporation (if known): PO6000037413

THIRD: The file date of the articles of incorporation: 3-15-2006

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.

Signature: _____

(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.)

Raymond Unquiza

(Typed or printed name of person signing)

President / Director

(Title of Person Signing)

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

08 MAR 31 AM 10:32

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Filing Fee: \$35