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SECRETARY OF STATE
TALLAHASSEF FI TATE

Dissolution

TB 2/1/19

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: CORPORATE DISSOLUTION DOCUMENT NUMBER: P06000065340 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PATRICIA VARGAS (Name of Contact Person) PV NURSING INC (Firm/Company) 386 NW SPANISH RIVER BLVD (Address) **BOCA RATON FL 33431** (City/State and Zip Code) For further information concerning this matter, please call: at (561) 376-3508

(Area Code & Daytime Telephone-Number) PATRICIA VARGAS (Name of Contact Person) Enclosed is a check for the following amount: ✓\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & \$\sum \$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) **STREET ADDRESS: MAILING ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

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:
	PV NURSING INC
SECOND:	The document number of the corporation (if known): P06000065340
THIRD:	The file date of the articles of incorporation: $05/08/2006$
FOURTH:	(CHECK AT LEAST ONE BOX)
	(CHECK AT LEAST ONE BOX) ✓ None of the corporation's shares have been issued. ☐ The corporation has not commenced business. No debt of the corporation remains unpaid.
	☐ 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.
	•
Sign	(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.)
	PATRICIA VARGAS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of Person Signing)

Filing Fee: \$35