

PEK000067569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2007 AUG 21 AM 10:47

PS 8/24/07
DISS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation

DOCUMENT NUMBER: PD6000067569

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

Please return all correspondence concerning this matter to the following:

Kelissa Huggins
(Name of Contact Person)

Huggins Healthcare Services Corporation
(Firm/Company)

P.O. Box 329
(Address)

Gretna, Florida 32332
(City/State and Zip Code)

For further information concerning this matter, please call:

Kelissa Huggins at (850) 856-5392
(Name of Contact Person) (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
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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2007 AUG 21 AM 10:47

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:
Huggins Healthcare Services Corporation

SECOND: The document number of the corporation (if known): P06000067569

THIRD: The file date of the articles of incorporation: 8/19/07

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: Kelissa Huggins
(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.)

Kelissa Huggins
(Typed or printed name of person signing)

Director / Owner
(Title of Person Signing)

Filing Fee: \$35