201000059002

<u>,, </u>	(Requestor's Name)	
	(Address)	
	(Address)	
ı	(City/State/Zip/Phone	#) .
PICK-UF	P WAIT	MAIL
	(Business Entity Nam	ie)
	(Document Number)	
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Certified Copies	Certificates	of Status
Special Instructions	to Filing Officer	1
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Office Use Only



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Dissolution W/Notice

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: P	rofit Articles	of Dissolution	on	
DOCUMENT NUMBER: _	P070000)59002		
The enclosed Articles of Diss	olution and fee a	re submitted for	filing.	
Please return all corresponden	ce concerning thi	s matter to the	following:	
	Benjamin .	J. Brown		
(Name of Contact Person)				
Community Rehabilitation Center Enterprise, Inc.				
(Firm/Company)				
	5206 North	Pearl Street	,	
(Address)				
i.	•	•	.α	
Jacksonville, Florida 32208 (City/State and Zip Code)				
	•	•		
For further information concerning this matter, please call:				
Benjamin J. Br	own) 358-1211 ext 103	
(Name of Contact I	Person)	(Area C	ode & Daytime Telephone Number)	
Enclosed is a check for the fo	llowing amount:		•	
✓\$35 Filing Fee ☐\$43.75 I Certifica	te of Status (A	\$43.75 Filing Fo Certified Copy Additional copy enclosed)	Certificate of Status &	
MAILING ADDRESS: Amendment Section Division of Corporation P.O. Box 6327			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 Department of State:
	Community Rehabilitation Center Enterprises of Jacksonville, Inc
SECOND:	The document number of the corporation (if known): P07000059002
THIRD:	The file date of the articles of incorporation: 05/16/2007
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.
Sign	ature: (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.)
	Reginald Gaffney
	(Typed or printed name of person signing)
	President
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

* * 2 * * *

Name of Corporation: Community Rehabilitation Center Enterprises of Jacksonville, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

This for- Profit organization will be dissolved up receipt of this document, by the Department of State, the state of Florida. Today's date is June 24, 2008, which is the Agencies date of dissolution. This organization will not be reinstated or reversed to its current for Profit Organization.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

There is no claim pending for this organization and no claim anticipated or expected to be filed no time in the current future.

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Reginald Gaffney

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00