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(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·	
(Cit	y/State/Zip/Phone	e #)	
PICK-UP		MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
]	

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05/16/08--01015--019 **35.00



Voldis Neuri 5-23-08

TO: Amendment Section **Division of Corporations**

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

Please return all correspondence concerning this matter to the following:

Name of Contact Person) At Home Senior Care INC (Firm/Company) 3619 Trafalgar WAY Build 11 Unit 103 (Address) Palm Harkor FL 34685 (City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person) at (727) 485-5300 (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)	S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
	set gala a		
MAILING ADDRESS:	STRI	EET ADDRESS:	
Amendment Section	Ame	Amendment Section	
Division of Corporations	Divis	Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		Executive Center Circle	
		hassee, 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 mea. <u>AT Home Service Care</u> <u>Twe</u>. The document number of the corporation (if known): <u>PO7000085202</u> date of the articles of incorporation: <u>7/27/07</u>

- SECOND:
- THIRD:
- FOURTH:

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:

: HUMA EMMAN (By a director, president or other officer of 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.)

<u>UESSICA</u> <u>DOWNEY</u> (Typed or printed name of person signing)

Filing Fee: \$35