

Apr 17, 2012 3:20 PM

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P090000003577

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6380

**EFFECTIVE DATE**

4/18/12

From:

Account Name : PADRON AND ASSOCIATES INC.  
Account Number : I20060000156  
Phone : (305)818-0404  
Fax Number : (305)818-0898

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 APR 17 AM 9:34

**REVOCATION OF DISSOLUTION  
AREN'S REHAB CENTER, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

RECEIVED

12 APR 17 AM 8:09

TALLAHASSEE, FLORIDA

Amf Diss  
@ 4/18/12

COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AREN'S REHAB CENTER, INC.

**DOCUMENT NUMBER:** P09000003577

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

Please return all correspondence concerning this matter to the following:

RALPH PADRON

(Name of Contact Person)

PADRON & ASSOCIATES, INC.

(Firm/Company)

2095 W 76TH STREET

(Address)

HIALEAH, FL 33016

(City/State and Zip Code)

For further information concerning this matter, please call:

RALPH PADRON

(Name of Contact Person)

at ( 305 ) 818-0404

(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

Apr. 17. 2012 3:21PM  
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**EFFECTIVE DATE**  
4.18.12

No. 3837 P. 4

### ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:

AREN'S REHAB CENTER, INC.

SECOND: The document number of the corporation (if known): P09000003577

THIRD: The date dissolution was authorized: 08/01/2011

Effective date of dissolution if applicable: 04/18/2012

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

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)

RONNIE ARENCIBIA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

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