Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000087868 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CLARA GIRALDO, P.A.

Account Number : I19990000017

: (305)485-9300

Fax Number

: (305)485-1098

DISSOLUTION OR WITHDRAWAL COMPLETE REHAB CENTER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate, Filing Menu

https://cfile.sunbiz.org/scripts/efilcovr.exe

4/4/2011

H110000878683

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 is: Complete Kenab Cente	<i>-</i> ,
SECOND:	The date dissolution was authorized:	
THIRD:	Adoption of Dissolution (CHECK ONE)	
Disa	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.	٠.
☐ Diss	solution was approved by vote of the shareholders through voting groups.	
e.	The following statement must be separately provided for each voting group nutitled to vote separately on the plan to dissolve: number of votes cast for dissolution was sufficient for approval by	
	(votting group)	TAKEN S.
Signature 4	(By the Chairman of Vice Chairman of the Board, President, or other officer)	
	Lauri Rhymer (Typed or printed name)	
	President.	
CLARA GIRA 1080 SW 84 A MIAMI, FL 331 (305) 485-9300	IVE SUITE C	