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To:

Division of Corporations

Fax Number : (850) 617 - 6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: 120000000019

Phone : (305)552+5973

Fax Number

: (305)220÷1440

DISSOLUTION OR WITHDRAWAL SUN HEALTH PLUS INC.

Certificate of Status		0
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ARTICLES OF DISSOLUTION

	ARTICLES OF DISSOLUTION
Pursuant to of dissoluti	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles in SECRETARY OF LORIDA
FIRST:	The name of the corporation as currently filed with the Florida Department of State: SUN HEALTH PLUS INC.
SECOND:	The document number of the corporation (if known): P1000033763
THIRD:	The date dissolution was authorized: 512-8112
	Effective date of dissolution if applicable: (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
·	Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35