Division of Corporations Electronic Filing Cover Sheet

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.

(((H12000048789 3)))



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

To:

Division of Corporations

Pax Number

: (850)617-6380

From:

Account Name

: CLARA GIRALDO, P.A.

Account Number : I19990000017

Phone

: (305)485-9300

Fax Number

: (305)485-1098

## DISSOLUTION OR WITHDRAWAL ANISIA'S HOME HEALTH, CORP.

<u> </u>	
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

BERRIZ&GIRALDO

H12 0000 487899

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

TIDOT. ITL	Cal
//	ome of the corporation is:
HNISIA	'S HOME HEALTH, CORP.
SECOND: The da	te dissolution was authorized: $\frac{O2/O1/2O/2}{}$
THIRD: Adopti	ion of Dissolution (CHECK ONE)
iimas. zaopa	on or properties.
	was approved by the shareholders. The number of votes cast for dissolution at for approval.
☐ Dissolution	was approved by vote of the shareholders through voting groups.
	wing statement must be separately provided for each voting group o vote separately on the plan to dissolve:
The number	of votes cast for dissolution was sufficient for approval by
The number	of votes cast for dissolution was sufficient for approval by
	(voting group)
Signed this	15T day of February 2012.
<u> </u>	7
Signature	
(B)	y the Chairman or Vice Chairman of the Board, President, or other officer)
,	ANISIA L. TORRES
*	(Typed or printed name)
	toes in the
	(Title)
RA GIRALDO P.A. SW 84 AVE SUITE (	- //
MI, FL 33155 5) 486-9300	H 12 0000 48789-