## 100000578

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
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Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

SUBJECT: NEXT GENERATION	HEALTH SEF	RVICES INC
DOCUMENT NUMBER: P1000005	7824	
The enclosed Articles of Dissolution and f	ee are submitted fo	or filing.
Please return all correspondence concerning	g this matter to the	following:
JUSTIN DIAMOND		
(Name of	Contact Person)	
NEXT GENERATION HEALTH	SERVICES IN	NC
(Fire	n/Company)	
800 W 42nd St Apt 2B		
(A	ddress)	
Miami Beach, FL, 33140		
(City/Sta	te and Zip Code)	
For further information concerning this made	tter, please call:	
JUSTIN DIAMOND	at (_954	709-0259
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:	
▼\$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing F Certified Copy (Additional copy enclosed)	Certificate of Status &
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

## 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 filed with the Florida Department of State:
	NEXT GENERATION HEALTH SERVICES INC
SECOND:	The document number of the corporation (if known): P10000057824
THIRD:	The file date of the articles of incorporation: 07/13/2010
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	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.
Signa	ature:
J	(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 of trustee, or other court appointed fiduciary, by that fiduciary.)
	ALEKSANDAR JOCIC
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of Person Signing)

Filing Fee: \$35