P10000080125

(Req	uestor's Name)	
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(Add	iress)	
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SECRETARY OF STATIONS
BIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section

Division of Corporations

-	
SUBJECT: New Dawn Family Adult Care Ho	me Inc
SUBJECT.	
DOCUMENT NUMBER: P10000086725	
The enclosed Articles of Dissolution and fee are submitte	d for filing.
Please return all correspondence concerning this matter to	the following:
Juliana C Bagaan	
(Name of Contact Person)
New Dawn Family Adult Care Home Inc	
(Firm/Company)	
1120 SE 33rd Terrace	
(Address)	
Cape Coral, FL 33904	
(City/State and Zip Code	e)
For further information concerning this matter, please call:	:
Juliana C Bagaan at (239	
(Name of Contact Person) (Are	ea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□\$35 Filing Fee ☑\$43.75 Filing Fee & □\$43.75 Filing Fee & Certified Co (Additional centions)	py 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:
	New Dawn Family Adult Care Home 1NC
SECOND:	The document number of the corporation (if known): P10000086725
THIRD:	The document number of the corporation (if known): P1000008725 The file date of the articles of incorporation: 10/21/2010
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.
Sign	(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.)
	Juliana C Bagaan (Typed or printed name of person signing)
	President (Title of Person Signing)

Filing Fee: \$35