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## DISSOLUTION OR WITHDRAWAL WELLCARE CLINIC INC

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## ARTICLES OF DISSOLUTION

Pursuant to se of dissolution	ction 607.1403, Florida Statutes, this Florida profit corporation submits the following articles	
first;	The name of the corporation as currently filed with the Florida Department of State:  Wellcare Olivic Inc.	
SECOND:	the document number of the corporation (if known): P1000009207	
THIRD:	The date dissolution was authorized:	
· .	Effective date of dissolution <u>if applicable:</u> (no more than 90 days after dissolution file date)	
FOURTH:	Adaption 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 by vote separately on the plan to dissolve:	
,	The number of votes cast for dissolution was sufficient for approval by	
•	(voting group)	
	signaturo:	
·	(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, toutles, or other court appointed fiduciary, by these fiduciary)	
	Lina Coarria.	
. <del>-</del> .	Typed or printed name of parson signing)  Thesiden+	
•	(Title of person signing)	
	Filing Fee: \$35	