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Division of Corporations

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Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I2000000019

Phone

: (305)552-5973

Fax Number

: (305)220-1440

DISSOLUTION OR WITHDRAWAL BETTER CARE REHAB. CENTER, INC

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MAY 2 3 2012

H12000137019 ARTICLES OF DISSOLUTION

Pursuant to s of dissolution	action 607.1403, Fiorida Statutes, this Florida profit corporation submits the following articles in:	
FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
1	Better lave Deholo. Center, Inc.	
SECOND:	The document number of the corporation (if known): P1100010 72.53	
THIRD:	The date dissolution was authorized: 05/21/12	•
	Effective date of dissolution if applicable: (no more that 90 days after dissolution file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the sharcholders. 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)	LE
•	PH IS	
	BY BOLD TO THE TOTAL TOTAL TO THE TOTAL TOTAL TO THE TOTAL TO THE TOTAL TOTAL TOTAL TO THE TOTAL	
	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 that fiduciary)	
•	Anaseli Valeno	
	(Typod or printed name of person signing)	•
•	President	
	(This of person signing)	

Filing Fee: \$35

H12000137019