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.

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (B05) 552-5973

Fax Number : (B05)220-1440

DISSOLUTION OR WITHDRAWAL MEGA HEALTH CENTER EAST LITTLE HAVANA, INC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

The name of the corporation as currently filed with the Florida Department of State:  MEGA HEALTH CENTER EAST LITTLE HAVANA, TWO SECOND: The document number of the corporation (if known): P12000 943912  THERD: The date dissolution was authorized: 07-17-13  Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)  FOURTH: Adoption 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 antitled to vote separately on the plan to dissolve:  The number of votes cast for dissolution was sufficient for approval by  (voting group)  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 acceiver, trustee, or other court appointed fiduciary, by that fiduciary)  Savina CENTE	/2031 0	:39 #4124 P.002/002
Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the foliable of dissolution:  FIRST: The name of the corporation as currently filed with the Florida Department of State:  MEGA: HEALTH CENTER EAST LITTLE HAVANA, INC  SECOND: The document number of the corporation (if known): Pl2000 939/2  THRD: The date dissolution was authorized: 0717-13  Effective date of dissolution if applicable:  (po nacre that 90 days after dissolution file date)  FOURTH: Adoption 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 to vote separately on the plan to dissolve:  The number of votes cast for dissolution was sufficient for approval by  Signature:  (By a director, president or other fofficer. If directors or officers have not been selected, by an incorporator: If in the bands of a speciever, matter, or other court appointed fiduciary, by that foliability.)		· · · · · · · · · · · · · · · · · · ·
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		that fiduciary)
		SONIA RENTZ
		(Typed or printed name of person signing)
PRESIDENT		PRESIDENT
(Title of person signing)		
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