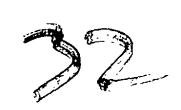
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Florida Department of St Division of Corporations Electronic Filing Cover Speci



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Division of Corporations

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: (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

DISSOLUTION OR WITHDRAWAL CABALLERO NURSING CARE, INC.

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

S. TALLENT APR 0 9 2019

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Corporate Filing Menu

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ARTICLES OF DISSOLUTION

Pursuant to section 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:	
	CABAILERO NURSING CIDE TILO	
SECOND:	The document number of the corporation (if known): 180000 6993	
THIRD:	The date dissolution was authorized: $4-8-19$	
	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 entitled to vote separately on the plan to dissolve:	
	The number of votes cast for dissolution was sufficient for approval by	
	(voting group)	
(voting group)		
	· · · · · · · · · · · · · · · · · · ·	
e:	ist	
31	gnature:	
	(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)	
	that fiduciary)	
	MIRTHA VIOLETA NEGRIN	
	(Typed or primed name of person signing)	
_	PRESIDENT	
(Title of person signing)		