P19000057055

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations NAME OF CORPORATION: CLAIRE RUSSA HOME CARE AGENCY ENC DOCUMENT NUMBER: <u>P1900057055</u> The enclosed Articles of Revocation of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/Company 5235 NEW SAVANNAH CIR-WESTEY CHAPEL FL 33545
City/State and Zip Code CORERUSSAHOMECARE CGMA, L. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sull AINE MCHILLAN At (813) 401-4363

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: X \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) Mailing Address: Street Address: Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST:	The name of the corporation is: CARE RUSSA HOME CARE	A6F +	2 Cy , 1	
SECOND:	The document number of the corporation (if known) is P1900057D	— 5 5		
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution			
	filed with the Florida Department of State is	ts, this da	ite will	
FOURTH:	The Revocation of Dissolution was authorized on 8 1 2020.			
FIFTH:	Adoption of Revocation of Dissolution (check one)			
	 The board of directors/incorporation revoked the dissolution. The board of directors revoked the dissolution authorized by the shareholders revocation was permitted by action by the board of directors alone pursuant to authorization. The shareholders revoked the dissolution and was authorized by the sharehold manner required by this chapter and by the articles of incorporation. 	that	ıe	
SIXTH:	A copy of the Articles of Dissolution is attached.	20 AUS		
	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)		S SOUNCE S SOUNCE STANK	
	(Typed or printed name of person signing)	: 12	ATION:	
	PRESIDENT			
	(Title of person signing)			

FILING FEE \$35

FILED Jun 30, 2020 Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST:

The name of the corporation as currently filed with the Florida Department of State:

CLAIRE RUSSA HOME CARE AGENCY, INC.

SECOND:

The document number of the corporation: P19000057055

THIRD:

The file date of the articles of incorporation: July 11, 2019

FOURTH:

None of the corporation's shares have been issued.

FIFTH:

No debt of the corporation remains unpaid.

SIXTH:

The net assets of the corporation remaining after winding up, if any, have been distributed.

SEVENTH:

A majority of the incorporators or directors authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: GUILAINE MCMILLAN

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED Jun 30, 2020 Secretary of State

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

Name of Corporation:

CLAIRE RUSSA HOME CARE AGENCY, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

06/30/2020

Mailing address where claims can be sent:

5235 NEW SAVANNAH CIR WESLEY CHAPEL, FL 33545

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: GUILAINE MCMILLAN

Electronic Signature of the Person Filing