

Charles B. Mead, Jr.
Attorney at Law

P93000064439

September 24, 1999

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

500002997855--3

-09/27/99--01116--005

****315.00 *****35.00

Re: Statement Of Change Of Registered Office Or Registered Agent Or
Both For Corporations

Dear Sir/Madam:

Enclosed please find the above referenced Statement Of Change for
the following nine corporations:

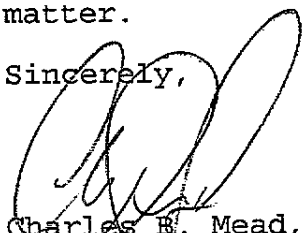
1. Home Patient Care, Inc.
2. Reliance Medical Laboratories, Inc.
3. Rainbow Medical Arts, Inc.
4. Cadigan Medical Group, Inc.
5. Steinhart Medical Group, Inc.
6. Freidburg Medical Group, Inc.
7. Fisher Medical Group, Inc.
8. RSG Construction, Inc.
9. Klimas Medical Group, Inc.

FILED
99 DEC 30 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I have also enclosed a check in the amount of \$315.00 to cover the
filing fee in total for these nine Statements Of Change.

If you should have any questions or concerns regarding the
foregoing, please do not hesitate to contact me at either the
address or telephone number listed immediately below. I thank you
in advance for your prompt and professional attention to this
matter.

Sincerely,


Charles B. Mead, Jr.
CBM/tf

P93000064439
12-30-99
208 FL 155



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 4, 1999

CHARLES MEAD, JR.
370 W. CAMINO GARDENS BLVD.
SUITE 300, PLAZA 7
BOCA RATON, FL 33432

SUBJECT: HOME PATIENT CARE, INC.
Ref. Number: P93000064439

We have received your document for HOME PATIENT CARE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order to file your document, the subject entity must first be reinstated.

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 1999 corporate annual report form in a timely manner. To reinstate the corporation you must submit the attached reinstatement application or annual report form and the appropriate fees.

The fees to reinstate the corporation are as follows: \$600 reinstatement fee, \$61.25 filing fee for the current year, and \$88.75 corporate supplemental fee for the current year.

Therefore, the total amount due to reinstate the corporation is \$750.00. Add an additional \$8.75 for each certificate of status requested.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6916.

Carol Mustain
Corporate Specialist

Letter Number: 299A00048051

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: HOME PATIENT CARE, INC.

SECOND: The date dissolution was authorized: December 17, 1999

THIRD: 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 vote of 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)

Signed this 29th day of December, 19 99

Signature

Bruce A. Kollada
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Bruce A. Kollada

(Typed or printed name)

Chief Financial Officer

(Title)

FILED
99 DEC 30 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA