## REHAB STAFFING

## 94000000597

September 5, 1997

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

400002290454--0 -09/11/97--01077--004 \*\*\*\*\*87.50 \*\*\*\*\*87.50

Dear Sirs:

Enclosed please find our completed and correct form for the dissolution of our Florida Corporation - Rehab Staffing Incorporated. It is our understanding that the effective date of the dissolution shall be on the day the form was signed.

Also enclosed is our check for the \$35. filing fee and \$52.50 for a certified copy of the dissolution. If there are any questions, please call (800) 597-9175.

Sincerely,

Bradley L. Dick

President

BLD/mw

encl.

97 SEP 11 PH 4: 06
SECRETARY OF STATE
ANASSES FI OBIOA

29/14

Vol. Diss.

## ARTICLES OF DISSOLUTION

OF SEP 11 PH 4: 06 on submits the FLOTIFE

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

FIRST:	The name of the corporation is: Rehab Staffing,
SECOND:	The date dissolution was authorized: 8/27/97
THIRĎ:	Adoption of Dissolution (CHECK ONE)
Diss was	colution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
☐ Diss	solution was approved by vote of the shareholders through voting groups.
7 e	The following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
	(voting group)
Signe	ed this 5th day of September, 19 97
Signature _	
•	(By the Chairman of Vice Chairman of the Board, President, or other officer)
	BradDick
'	(Typed or printed name)
	President
	(Title)