21191 Requestor's Name Address CASA SPECIALIZED SERVICES, INC. 1242 BUCHANAN STREET Office Use Only HOLLYWOOD, FL. 33019 NT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time Walk in ☐ Will wait Certificate of Status Photocopy Mail out AMENDMENTS. NEW FILINGS 800002500098--7 -04/24/98--01098--010 *****35.00 *****35.00 Amendment Profit Resignation of R.A., Officer/ Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger Vo I DISUE CORF REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Examiner's İnitials

Other

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: CASA SPECIALIZED SE	RVICES, INC.
	EIN: 65-0494380	
SECOND:	The date dissolution was authorized: DECEMBER 31, 19	98 APR
THIRD:	Adoption of Dissolution (CHECK ONE)	SEE, FEE
Disse was	olution was approved by the shareholders. The number of vote sufficient for approval.	s cast for dissolution
☐ Disso	plution was approved by vote of the shareholders through votin	ig groups.
er	the following statement must be separately provided for each vontitled to vote separately on the plan to dissolve: number of votes cast for dissolution was sufficient for approval	
	(voting group)	
Signed	this <u>31st</u> day of <u>DECEMBER</u>	, 19 <u>96</u> .
Signature _	Jones and	
_	(By the Chairman or Vice Chairman of the Board, President, or other office	er)
	BRIAN F. CARR	
	(Typed or printed name)	
	PRESIDENT	
	(Title)	
	TEL: (954) 450-2707	