Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000239808 3)))



H200002398083ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

DISSOLUTION OR WITHDRAWAL RESIDENCIA SAN LAZARO HOME CARE CORP.

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

Electronic Filing Menu

Corporate Filing Menu

Help



JUL 2 4 2020

4.-

D COMMELL

	 2920	
	23	•
ARTICLES OF DISSOLUTION	Ū	:

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:
	RESTUENCIA SAN LAZARA HOUSE DOCE
SECOND:	The document number of the corporation (if known): 1950000 43002
THIRD:	The date dissolution was authorized: 7-21-20
	Effective date of dissolution if applicable:
	(no more than 90 days after dissolution file date) not be listed as the document's effective date on the Department of State's records.
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

(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)

ELVIRA RODRIGUEZ

(1) pad or printed that the or person signing)

(Title of person signing)