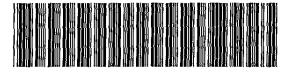
P95000091001

(Re	equestor's Name)		
(Ac	ldress)		_
(Ac	Idress)		_
V	,		
			_
(Cit	ty/State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL	
			
			_
(Bu	isiness Entity Nam	ne)	
(Do	ocument Number)		_
Certified Copies	Certificates	of Status	_
			٦
Special Instructions to	Filing Officer:		l
			ļ
			I
			ļ
			ł
			1
			_

Office Use Only



500012240005

02/14/03--01034--010 **35.00

CILICID 03 FEB | 14 | AM | 10: 34 SECREDINARY OF STATE

Dissolution

T BROWN FEB 1 9 2003

Member RICPA Member FICPA

February 12, 2003

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

RE: Dissolution of JR Health Management, Inc.

Sir/Madam:

Enclosed please find an original and two copies of the Articles of Dissolution for the above-mentioned corporation, along with a check in the sum of \$35.00 Said check covers the cost of Filing the Articles of dissolution.

Thank you for your kind attention to this matter. If you have any questions, please contact the undersigned at your earliest convenience.

Sincerely,

Elizaběth A. Wilsman Certified Public Accountant

EAW/mdk Enc.

ARTICLES OF DISSOLUTION

O3 FEB 14 AM 10: 34 Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits t following articles of dissolution: TR HEALTH NANAGEMENT, INC. FIRST: The name of the corporation is:_____ SECOND: The date dissolution was authorized: 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 RONALD

(Typed or printed name)