

P96000036334

Requestor's Name

DR. JOHN & LUCIA CHAN
15130 N.W. 87 CT.
MIAMI LAKES, FL 33216

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

300002252213--7
-07/30/97--01041--021
*****35.00 *****35.00

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 AUG 29 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials

Joe 8/29

ARTICLES OF DISSOLUTION

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED
97 AUG 29 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SECOND: The articles of incorporation were filed on: 4/26/94

THIRD: (CHECK ONE)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

FOURTH: No debt of the corporation remains unpaid.

FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SIXTH: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☐ A majority of the directors authorized the dissolution.

Signed this 23 day of JULY, 19 97

Signature LUCIA CHAN Lucia Chan
(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)

LUCIA CHAN

(Typed or printed name)

ADMINISTRATOR & President

(Title)



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

August 7, 1997

DR. JOHN & LUCIA CHAIN
15130 N.W. 87 CT.
MIAMI LAKES, FL 33016

SUBJECT: QUALITY CARE, INC.
Ref. Number: P96000036334

We have received your document for QUALITY 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):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 487-6908.

Teresa Brown
Corporate Specialist

Letter Number: 497A00040168