## D ~~ etor's Name Prof. Reimbursement Socurious 2205 Lauren Cir Brandon Fl 33510 Phone # City/State/Zip Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time Walk in Certificate of Status Photocopy Will wait ☐ Mail out AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS QUALIFICATION VS MAY 1 3 1998 Annual Report Foreign Fictitious Name 1) oldi < Limited Partnership Name Reservation Reinstatement Trademark

Examiner's Initials

Other

## ARTICLES OF DISSOLUTION

FILED 98 MAY -5 AV C

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following SECRETARY OF STATE	
ancies of a	ALLAHASSEE, FLORIDA
FIRST:	The name of the corporation is: <u>Professional</u> <u>Reimburs ment</u>
Solution	us Inc.
SECOND:	The filing date of the articles of incorporation was: _//-4-96
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.
Sign	ed this 30th day of APRIL , 19 98
Signatu	re <u>Ausan</u> & 7 Junson
	(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)
	SUSAN L. HENSON (Typed or printed name)
	PRESIDENT (Title)
	(1144)