

P970000 P285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

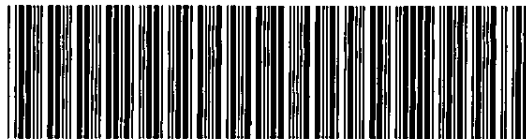
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Dis/Notice
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 JAN-28 PM 1:09

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF CORPORATION

DOCUMENT NUMBER: H97000003341

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK S. YARNOLD

(Name of Contact Person)

GERIATRIC CARE MANAGEMENT AND COUNSELING SERVICE, INC.

(Firm/Company)

1400 N.E. MIAMI GARDENS DR. #206-C

(Address)

NORTH MIAMI BEACH, FLORIDA 33179

(City/State and Zip Code)

(OLD ADDRESS: 1550 N.E. MIAMI
GARDENS DR. #507, NORTH MIAMI
BEACH, FLORIDA 33179)

For further information concerning this matter, please call:

MARK S. YARNOLD

(Name of Contact Person)

at (305) 761-1508

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

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

FIRST: The name of the corporation as currently filed with the Florida Department of State:

GERIATRIC CARE MANAGEMENT + COUNSELING SVC. INC.

SECOND: The document number of the corporation (if known): H97000003341

THIRD: The file date the articles of incorporation: MARCH 3, 1997

FOURTH: (CHECK AT LEAST ONE BOX)

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

☐ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

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

SEVENTH: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signature: _____

(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.)

MARK S. YARNOLD

(Typed or printed name of person signing)

PRESIDENT + OWNER

(Title of Person Signing)

FILED
2008 JAN 28 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: GERIATRIC CARE MANAGEMENT & COUNSELING SVC. INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

THIS CORPORATION HAS NO DEBTS, LIENS AGAINST IT OR ANY
OTHER FINANCIAL OBLIGATIONS.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

MARK S. YARNOLD
1400 N.E. MIAMI GARDENS DR. #206-C
NORTH MIAMI BEACH FLORIDA 33179

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

MARK S. YARNOLD

Printed Name of the Person Filing

Mark S. Yarnold

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00