

DEBIT MEMORANDUM

FOR OFFICIAL USE

DATE

NUMBER

TO :

DEPARTMENT OF STATE

P97 0000 23353

STATE OF FLORIDA
OFFICE OF STATE TREASURER
TALLAHASSEE FLORIDA

| FUND | AMOUNT | REASON RETURNED | KEY # |
|-----------------|----------|--------------------|-------|
| GENERAL REVENUE | 0.00 | INSUFFICIENT FUNDS | 1 |
| TRUST | 1,525.00 | ACCOUNT CLOSED | 2 |
| OTHER | | UNCOLLECTED FUNDS | 3 |
| TOTAL | 1,525.00 | OTHER | 4 |

CROSS
REF

DISTRIBUTION
SAMAS CODE

REASON

AMOUNT

| | | | |
|-----|--------------------------------------|---|----------|
| 012 | 45-20-2-130001-45300000-00-000100-00 | 2 | 35.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | 1 | 122.50 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | 2 | 122.50 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | 1 | 1,245.00 |

GRAND TOTAL:

\$ 1,525.00
=====

73274-C

RECEIVED

97 APR -9 PM 1:06
FINANCIAL MANAGEMENT

Process Date: 03/20/97

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.

Bill Nelson

State Treasurer

DEL VALLE HEALTH CARE, INC.
425 EAST 24TH STREET, SUITE NO. 8
MIAMI, FL 33013

1030
63-1182 8/670

MARCH 13 1997

PAY
TO THE
ORDER OF

Secretary State

\$ 122.50

DOLLARS



ACCOUNT CLOSED
020012827

FOR F&M INSTALLATIONS, INC.

⑈001030⑈ ⑈067011922⑈ 0802017034⑈ ⑈0000012250⑈

poor
quality
for
Reproduction

ENDORSE HERE

PT OF STATE 4500453
FOR DEPOSIT ONLY
-L 4/97--01094--011
DO NOT WRITE OR STAMP BELOW THIS LINE
FEDERAL BUREAU OF INVESTIGATION

1 20/001/200 020 1050004444 D20-05 10E30000474

0660000109

050164183 03-10-97
20 BARNETT JAX
800-5239498 0630000474
06 494511 4517
06 494511 03-17 JAX FL 08

>06300000474
4517
06 494511

020012227 03-18-97



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

April 14, 1997

Del Valle Health Care, Inc.
425 East 24th St.
Suite No. 6
Miami, FL 33013

SUBJECT: F & M INSTALLATIONS, INC.
Ref. Number: P97000023353

Debit Memo #: 73274 -*e*

This is to inform you that your check #1030 dated March 13, 1997 in the amount of \$122.50 and submitted for F & M INSTALLATIONS, INC. has been returned to us by your bank because of Account Closed.

We request that you remit a cashier's check or money order in amount of \$137.50 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations
Attn: Melinda Lilliston
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions concerning the returned check, please call
(904) 487-6900.

Sincerely,
Melinda Lilliston
Administrative Assistant I
Division of Corporations

Letter number: 697A00018570

cc:



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

May 16, 1997

Del Valle Health Care, Inc.
425 East 24th St.
Suite No.6
Miami, FL 33013

SUBJECT: F & M INSTALLATIONS, INC.
Ref. Number: P97000023353

Debit Memo #: 73274-C

Due to your failure to respond to our previous letter advising you of the returned check #1030, the Articles of Incorporation for F & M INSTALLATIONS, INC. have been cancelled and are considered not filed as of May 16, 1997.

The name of your corporation is now available for use.

If you have any questions concerning the returned check, please call (904) 487-6900.

Sincerely
Melinda Lilliston
Administrative Assistant I
Division of Corporations

Letter number: 097A00026544