

P97006039576

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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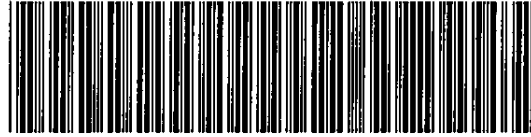
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TQ:** Amendment Section  
Division of Corporations

**SUBJECT:** GROUP LIVING HOME FOR THE HANDICAPABLE, NEW  
CORP.

**DOCUMENT NUMBER:** P97000039576

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

Please return all correspondence concerning this matter to the following:

Audrey G. Finizio  
(Name of Contact Person)

Group Living Home for The Handicapable, New Corp.  
(Firm/Company)

1927 W Court Lake Clarke Shores  
(Address)

West Palm Beach, Florida 33406  
(City/State and Zip Code)

For further information concerning this matter, please call:

Audrey Finizio at (561) 968-1764  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$35.00 Filing Fee

### **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 607.1403, 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:

GROUP LIVING HOME FOR THE HANDICAPABLE, NEW CORP.

**SECOND:** The document number of the corporation (if known): P97000039576

**THIRD:** The dissolution was authorized: 10/25/06

Effective date of dissolution if applicable: 10/25/06

(no more than 90 days after dissolution file date)

**FOURTH:** Adoption of Dissolution (Check One)

X Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

       Dissolution was approved by the shareholders through voting group

*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

(voting group)

Signature: Audrey G. Finizio

(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)

Audrey G. Finizio

(Typed or printed name of person signing)

President

(Title of person signing)

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