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TO: DIVISION OF CORPORATIONS

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(850) 922-4000

FROM: RITA SALCINES

ACCT#:

075350000406

CONTACT: RITA M SALCINES

PHONE: (305)443-1872

FAX #:

(305) 447-0276

NAME: PROMETEO COMMUNITY MENTAL HEALTH, INC.

AUDIT NUMBER.....H97000018720 DOC TYPE......DISSOLUTION

CERT, OF STATUS...

PAGES..... 2

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## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this corporation submits the following articles of dissolution:

first:	The name of the corporation is: Prometeo Community	Mental Health, Inc.
SECOND:	The date dissolution was authorized: November 10, 1	997
THIRD:	Adoption of Dissolution (check one)	
	Dissolution was approved by the shareholders. The numerous cast for dissolution was sufficient for approval.	iber of votes
	Dissolution was approved by vote of the shareholders through voting groups.	7 97 I
	[The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	FILED NOV 13 PM LAHASSEE,
	"The number of votes cast for dissolution was sufficient for approval by"	H W 28
	(voting group)	Pri B
Sign	ned this 10th day of November , 19 97	······································
	Signature House, or other or the Board, President, or other ordicer)	
•	Yolanda Aranzazu	
	(Typed or printed name)	
	President	•
	(Title)	·

H97000018720

This document prepared by Rita Salcines (305)443-187: 2827 SW 18 St., Miami, Fl. 33145