P99000079740

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(Cit	y/State/Zip/Phone	e #)
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SECRETARSEE, FLORIG

Disselution 5-3-05

COVER LETTER

Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: <u>P9900079740</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Robert Berenguer (Name of Person)
Professional Health Services of Miami, Inc (Name of Firm/Company)
12700 SW 13 th Manor (Address)
Dovie, FL 33325 (City/State/and Zip Code)
For further information concerning this matter, please call:
Pobert Berenguer at (786) 512-7315 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32314

Tallahassee, Florida 32399

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:		
	Professional Health Services of Miami, Inc.		
SECOND:	The document number of the corporation (if known): P9900079740		
THIRD:	The file date of the articles of incorporation: $09/08/99$		
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.		
Signed this 15 day of MOYCH 2005.			
5	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.)		
	Robert Berenguer (Typed or printed name of person signing)		
	President (Title of person signing)		

Filing Fee: \$35