## 563339

(Re	equestor's Name)	<u></u>
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	s of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: SCRUMED - CARE SUPPLIES, INC.			
DOCUMENT NUMBER: 5 6 3 3 3 9			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Name of Contact Person)			
(Name of Contact Person)			
HALUT SINAGRA PAUL & POLINO (Firm/Company)			
(Firm/Company)  300 Sevilla Ave. # 210  (Address)  Coance Gabbs, Fl. 33174			
(Address)			
Coans GADGS, Ft. 33134	141 51	05	
(City/State and Zip Code)	光光	8CT	
For further information concerning this matter, please call:	PARY I	21	LILED
(Name of Contact Person) at (305) 442 9393  (Area Code & Daytime Telephone Nur	TALL AHASSEE FLOT	19: - 18: -	_
(Name of Contact Person) (Area Code & Daytime Telephone Nur	nber)	σ	
Enclosed is a check for the following amount:			
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & \bigcup \\$52.50 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified Copy  (Additional copy is enclosed) (Additional copy is enclosed)	Ė		
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section			

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

## 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:	
	Servinon-GARS Supplies, Lic.	
SECOND:	The document number of the corporation (if known): J 6 3 3 3 9	
THIRD:	The date dissolution was authorized: December 1, 2004	
	Effective date of dissolution if applicable: Dr LortBru 1 2004  (no more than 90 days after dissolution file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	
	Dissolution was approved by of the shareholders through voting groups.	
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	
	The number of votes cast for dissolution was sufficient for approval by	
	الم	
	Signature:  (By a discotr, 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)  A UGEL CUELLA R  (Typed or printed name of person signing)  PROS: DOLT	+ ILEU
	(Title of person signing)	

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: SERVINCO - CARE Supplies ISC.	
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:	
CLAIMANT NAME ADDRESS, AMOUNT CLAIMED AND BASIS OF CLAIM.	
NUD BASIS OF Chim.	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
LAVIOR L. SUNREZ, ESO.  HALOT, SINAGRA PAUL & TOLINO  300 SOUTH AUC. # 210  CORNE GABGS, Flm. 33134	_
HILO SIDIERA PAUL & TOLIDO	05 OCT
300 Sovilly Ave. \$ 210	1.5
CORNE CABES Phr. 33134	
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A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filling of this notice.	
Xayion 1. SURTE VII	
Printed Name of the Person Filing Signature of the Person Filing	

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