

V10236

November 12, 2001



FORTIS

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Florida Department of State
Corporations Division
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

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-11/14/01--01026--001
*****35.00 *****35.00

Re: Adultcare, Inc.

Dear Sir or Madam:

I am enclosing an original and one copy of the Articles of Dissolution for Adultcare, Inc. along with a check in the amount of \$35.00 for the filing fee. Please return a file stamped copy to me at 501 West Michigan, Milwaukee, WI 53203. Please feel free to contact me if you have any questions.

Yours sincerely,

Molly A. Johnson
Legal Operations Coordinator
414.299.6771

Encl.

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Fortis Health

501 West Michigan
P.O. Box 3050
Milwaukee, WI
53201-3050
Telephone
1 800 800 1212

FILED
01 NOV 14 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dissolution

T BROWN NOV 19 2001

ARTICLES OF DISSOLUTION

FILED
01 NOV 14 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FIRST: The name of the corporation is: Adultcare, Inc.

SECOND: The date dissolution was authorized: October 15, 2001

THIRD: 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 vote 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

(voting group)

Signed this 15th day of October, 2001.

Signature

Katherine Katsidhe Greenzang
(By the Chairman or Vice Chairman of the Board, President, or other officer)

KATHERINE KATSIDHE GREENZANG
(Typed or printed name)

Assistant Secretary
(Title)