(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
•		



02/06/09--01010--004 **35.00



COVER LETTER

TO: Amendment Section	•
Division of Corporations	
SUBJECT: Dissolution of Home I.V. Care, Inc.	
DOCUMENT NUMBER: V23337	
The enclosed Articles of Dissolution and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	ne following:
George W. Warren Jr.	
(Name of Contact Person)	•
Bay Pharmacy Home I.V. Cer.	· e_
(Firm/Company)	:
2 E. Magnolia Ave	
(Address)	· ·
Eustis, Florida 32726	
(City/State and Zip Code))
For further information concerning this matter, please call:	
George W. Warren Jr. at (352	357-4341
(Name of Contact Person) (Area) 357-4341 Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
✓\$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Certified Copy (Additional copy enclosed)	y Certificate of Status &
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 607.1401, 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:		
	Home I.V. Care, Inc		
SECOND:	The document number of the corporation (if known): V23337		
THIRD:	The file date of the articles of incorporation: $3-23-1999$		
FOURTH:	(CHECK AT LEAST ONE BOX):	71.	
•	None of the corporation's shares have been issued.	OFEB-6	
	The corporation has not commenced business.	SEE.	
FIFTH:	No debt of the corporation remains unpaid.	FLOT	
SIXTH:	The net assets of the corporation remaining after winding up have been disto the shareholders, if shares were issued.	一	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	,	
	A majority of the incorporators authorized the dissolution.		
	A majority of the directors authorized the dissolution.		
		,	
Sign	ature:	7	
	(By a director, president or other officer in directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	i incorporator - if	
*,	(Typed or printed name of person signing)		
·	(Title of Person Signing)		
•	(Title of Person Signing)	, ,	

Filing Fee: \$35