

V54712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

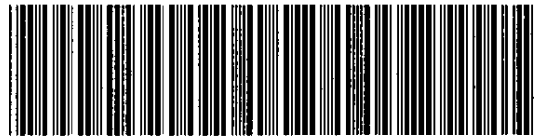
(Business Entity Name)

(Document Number)

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200159364362

Revocation of  
diss

08/14/09--01026--013 \*\*35.00

FILED  
2009 AUG 14 AM 10:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ADP  
8/18/09

**GASSMAN, BATES & ASSOCIATES, P.A.**  
**ATTORNEYS AT LAW**

ALAN S. GASSMAN \*\*  
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- \* LL. M. IN TAXATION
- + BOARD CERTIFIED LAWYER IN  
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August 13, 2009

**VIA OVERNIGHT DELIVERY**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Americare School of Nursing, Inc.  
Document Number V54712

Dear Sir/Madam:

Enclosed for filing are Articles of Revocation of Dissolution for Americare School of Nursing, Inc. I have also enclosed a copy of Americare School of Nursing, Inc.'s Articles of Dissolution which were filed on April 24, 2009, along with a check in the amount of \$35.00 for the filing fee.

Thank you for your attention to the matter set forth herein.

Very truly yours,

  
London L. Bates

LLB:cak  
Enclosures

cc: Gerald W. Newman

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Americare School of Nursing, Inc.

**DOCUMENT NUMBER:** V54712

The enclosed *Articles of Revocation of Dissolution* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

London L. Bates, Esquire

Name of Contact Person

Gassman, Bates & Associates, P.A.

Firm/Company

1245 Court Street, Suite 102

Address

Clearwater, FL 33756

City/State and Zip Code

london@gassmanpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

London L. Bates, Esquire

Name of Contact Person

at ( 727 ) 442-1200

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy  
(Additional copy is enclosed)

**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 REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST: The name of the corporation is Americare School of Nursing, Inc.

SECOND: The document number of the corporation (if known) is V54712

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is April 24, 2009

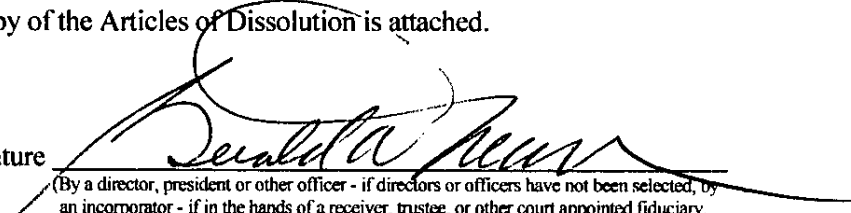
FOURTH: The Revocation of Dissolution was authorized on August 5, 2009

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☐ The board of directors revoked the dissolution.
- ☐ The incorporators revoked the dissolution.
- ☐ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization.
- ☒ The shareholders revoked the dissolution and the number of votes cast was sufficient for approval.
- ☐ The shareholders revoked the dissolution by voting groups - the number of votes cast by \_\_\_\_\_ was sufficient for approval.  
(voting group)

SIXTH: A copy of the Articles of Dissolution is attached.

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)

Gerald W. Newman

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35

FILED  
2009 AUG 14 AM 10:03  
TALLAHASSEE  
FLORIDA  
SECRETARY OF STATE

**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:  
AMERICARE SCHOOL OF NURSING INC.

SECOND: The document number of the corporation (if known): V54712

THIRD: The file date of the articles of incorporation: JUN 28, 1992

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.

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.)

GERALD W. NEWMAN

(Typed or printed name of person signing)

President

(Title of Person Signing)

Filing Fee: \$35

FILED  
09 APR 24 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA