

V64724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

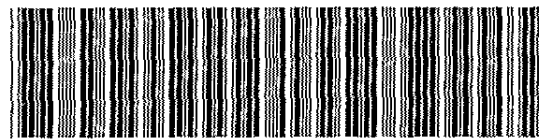
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Lifeline Health Care of Southwest Florida, Inc.

DOCUMENT NUMBER: V64724

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

Please return all correspondence concerning this matter to the following:

V=002048

James T. Wilson
(Name of Contact Person)

2770-000.00.00=

43.75

Lifeline Health Care of Southwest Florida, Inc.
(Firm/Company)

600 Clifty Street
(Address)

Somerset, KY 42503
(City/State and Zip Code)

For further information concerning this matter, please call:

James T. Wilson
(Name of Contact Person)

at (606) 679-4100
(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

