



DATE	DOCUMENT ID	DESCRIPTION	FLING	EXPED	PENALTY	CERT	COPY
10/05/2012	201227800865	DISSOLUTION (DIS)	50.00	.00		.00	.00

Receipt

This is not a bill. Please do not remit payment.

KESSLER & BALLENGER CO LPA
ATTN CINDY NOWLAND
7650 RIVERS EDGE DR STE 220
COLUMBUS, OH 43235

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

916376

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

DIALYSIS SERVICES OF CENTRAL OHIO, INC.

and, that said business records show the filing and recording of:

Document(s):
DISSOLUTION

Document No(s):
201227800865



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus,
Ohio this 4th day of October, A.D.
2012.

Ohio Secretary of State



Form 561 Prescribed by:
JON HUSTED
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Makes checks payable to Ohio Secretary of State

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 1329
Columbus, OH 43216

Expedite Filing (Two-business day processing
time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

Certificate of Dissolution
(For-Profit, Domestic Corporation)
Filing Fee: \$50

2012 SEP 17 AM 8:44

Complete the following information.

The corporation named below has adopted a resolution of dissolution.

Name of Corporation

Charter Number

Location of Principal Office in Ohio

City

County

State

The internet address of each domain name held or maintained by or on behalf of the corporation:

The corporation did not hold or maintain any domain names.

2012 OCT -4 PM 1:42

Name and address of the Statutory Agent.

RUSSELL W. KESSLER

Name

7650 RIVERS EDGE DRIVE

Address

COLUMBUS

City

Ohio

State

43235

Zip Code

Please complete this section if the corporation is appointing a new agent.

ACCEPTANCE OF APPOINTMENT

The Undersigned, , named herein as the
Statutory Agent Name

Statutory agent for,
Corporation Name

hereby acknowledges and accepts the appointment of statutory agent for said corporation.

Statutory Agent Signature
Individual Agent's Signature/Signature on behalf of Corporate Agent

If the agent is an individual using a P.O. Box, check this box to confirm the agent is an Ohio resident.

The date of dissolution if other than the filing date
MM/DD/YYYY

Note: The date of dissolution must be on the date of filing, or a later date that is not more than 90 days after the date of filing, pursuant to Ohio Revised Code section 1701.86(F)(7).

Pursuant to Ohio Revised Code section 1701.87(E), a copy of the notice required by Ohio Revised Code section 1701.87(B) must be attached to this filing.

Check only one box below and provide information as required:

- (1.) The resolution of dissolution was adopted by the **Incorporators**. Pursuant to Ohio Revised Code section 1701.86(C), if an initial stated capital was not set forth in the articles then before the corporation begins business, or if an initial stated capital is set forth in the articles then before subscriptions to shares shall have been received in the amount of that initial stated capital, the incorporators or a majority of them may adopt, by a writing signed by them, a resolution of dissolution. (138-DISI)

The names and addresses of all the incorporators must be set forth below:

<input type="text"/>	<input type="text"/>
Name	Address
<input type="text"/>	<input type="text"/>
Name	Address
<input type="text"/>	<input type="text"/>
Name	Address

- (2.) The resolution of dissolution was adopted by the **Directors**. Pursuant to Ohio Revised Code section 1701.86 (D), directors may adopt a resolution of dissolution in the following cases, please check the box to state the proper statement of the basis for the adoption. (137-DISD)

The resolution of dissolution was adopted:

- When the corporation has been adjudged bankrupt or has made a general assignment for the benefit of the creditors;
- By leave of the court, when a receiver has been appointed in a general creditor's suit or in any suit in which the affairs of the corporation are to be wound up;
- When substantially all of the assets have been sold at judicial sale or otherwise;
- When the articles have been canceled for failure to file annual franchise or excise tax returns or for failure to pay franchise or excise taxes and the corporation has not been reinstated or does not desire to be reinstated; or
- When the period of existence of the corporation specified in its articles has expired.

- (3.) The articles are hereby dissolved by the **Shareholders** pursuant to Ohio Revised Code section 1701.86(E). (150-DISS)

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

When the resolution is adopted by the incorporators, the certificate shall be signed by not less than a majority of the incorporators.

John P. MacLaurin
Signature

By (if applicable)

In all other cases, the certificate shall be signed by any authorized officer, unless the officer fails to execute and file such a certificate within 30 days after the date upon which such certificate is to be filed. In the latter event, the certificate may be signed by any three (3) shareholders or, if there are less than three (3) shareholders, all of the shareholders, form a statement that the persons signing the certificate are shareholders and are filing the certificate because of the failure of the officers to do so.

JOHN P. MACLAURIN
Print Name

Signature

By (if applicable)

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

Print Name

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Signature

By (if applicable)

Print Name

Complete the information in this section.

AFFIDAVIT

In lieu of dissolution releases from various governmental authorities (ORC section 1701.86(l)).

DIALYSIS SERVICES OF CENTRAL OHIO, INC.
Name of Corporation

The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate of Dissolution and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1701.95 of the ORC.

Agency	Date Notified	Agency	Date Notified
Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, Ohio 43215	09-13-2012	Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319	09-13-2012
		Overnight: P.O. Box 182413 Columbus, OH 43218-2413	Regular: P.O. Box 182413 Columbus, OH 43218-2413

Agency	Date Notified
Ohio Department of Taxation Dissolution Section 4485 Northland Ridge Blvd. Columbus, Ohio 43229	09-13-2012

Note: This affidavit must be signed by one or more persons executing the certificate of dissolution or by an officer of the corporation.

Signature John P. MacLaurin Title PRESIDENT

JOHN P MACLAURIN
Name

692 HILL ROAD NORTH
Mailing Address

PICKERINGTON OH 43147
City State Zip Code

Acknowledged before me and subscribed in my presence on 09-13-2012
Date



Cindy G. Nowland
Notary Public, State of Ohio
My Commission Expires 10-05-2014

Commission Expires 10-05-2014
Date

Complete the information in this section.

**AFFIDAVIT OF PERSONAL PROPERTY
(ORC Section 1701.86(H)(1))**

State of

County of

SS:

Name of Officer

, being first duly sworn, deposes and says that she/he is

Title of Officer

of

Name of Corporation

and this affidavit is made in compliance with section of the Ohio Revised Code.

That said corporation has: (Check one (1) of the following)

A. Has no personal property in any county in the State of Ohio

B. Has personal property in the following county(ies)

and that the net assets of said corporation are sufficient to pay all personal property taxes accrued to date.

Signature:

Title:

Acknowledged before me and subscribed in my presence on

Date



Cindy G. Nowland
Notary Public, State of Ohio
My Commission Expires 10-05-2014

Notary Public

Expiration date of Notary Public's Commission Date

**NOTICE OF DISSOLUTION FOR DIALYSIS
SERVICES OF CENTRAL OHIO, INC.**

The above-referenced company is filing a Certificate of Dissolution with the Ohio Secretary of State. Please note the following:

1. All claims shall be presented in writing and shall identify the claimant and contain sufficient information to reasonably inform Dialysis Services of Central Ohio, Inc. of the substance of the claim;
2. The mailing address to send the claim is: c/o Russell W. Kessler, 7650 Rivers Edge Drive, Columbus, OH 43235;
3. The deadline for receipt of any claim shall be sixty days from receipt of this Notice;
4. Any claim not received sixty days from receipt of this Notice shall be barred; and
5. Dialysis Services of Central Ohio, Inc. may make distributions to other creditors or claimants, including distributions to shareholders of the corporation without further notice to the claimant.