

P05000075272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

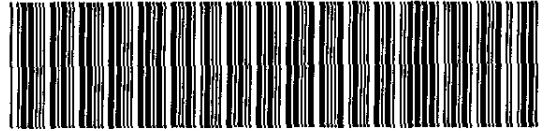
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400058440694

08/12/05--01010--010 \*\*35.00

**FILED**  
05 AUG 12 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8-16  
final

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution - Centro Medico La Rosa, Inc.

**DOCUMENT NUMBER:** P05000075272

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

Please return all correspondence concerning this matter to the following:

Lilia R. Diaz *LD*

(Name of Person)

Centro Medico La Rosa, Inc.

(Name of Firm/Company)

275 Deer Run Drive

(Address)

Miami Springs, Florida 33166

(City/State/and Zip Code)

For further information concerning this matter, please call:

Lilia R. Diaz

(Name of Person)

at ( 305 ) 962-1597

(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, Florida 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**ARTICLES OF DISSOLUTION**

Pursuant to section 607.1403, 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:

Centro Medico La Rosa, Inc

SECOND: The document number of the corporation (if known): P0500007527

THIRD: The date dissolution was authorized: July 31, 2005

Effective date of dissolution if applicable: July 31, 2005  
(no more than 90 days after dissolution file date)

**FILED**  
05 AUG 12 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOURTH: Adoption of Dissolution (CHECK ONE)

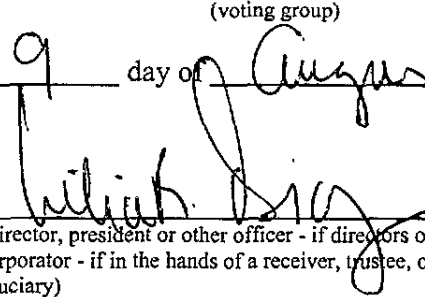
- Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- Dissolution was approved by of the shareholders through voting groups.

*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 9 day of August, 2005

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)

Lilia R. Diaz

(Typed or printed name of person signing)

President

(Title of person signing)

**Filing Fee: \$35**