P04000059681

		į.			
(Re	equestor's Name)				
(Ac	idress)				
(Ac	ddress)				
<u> </u>	·····				
(Ci	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(R)	usiness Entity Nam	0)			
(OC	ioness Entity Nam	e)			
(Do	ocument Number)				
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
li -					
•]			

Office Use Only



700115530407

01/22/08--01033--011 **35.00

OB JAN 22 PM 4: 06
SECRETARY OF STATE

MM-1/3c W/ Notice 01-24-08

COVER LETTER

'TO: Amendment Section Division of Corporations	
SUBJECT: Tuong Ai Ngo	DDS # Associates, PA
DOCUMENT NUMBER: PO	4000059681
The enclosed Articles of Dissolution and fed	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Tuong Ai N (Name of C	Populact Person)
	DDS & Associates, PA (Company)
	dress) 575 Edgebrook Ln dress) WPB F1 3341
Royal Palm Bea (City/State	and Zip Code)
For further information concerning this matter	er, please call:
(Name of Contact Person)	at (561) 762 - 6978 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amoun	t:
☐\$35 Filing Fee ☐\$43.75 Filing Fee & ☐ Certificate of Status	\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certified Copy Certificate of Status & (Additional copy is enclosed) 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 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:
	Tuong-Ai Ngg DDS & Associates, P.A.
SECOND:	The document number of the corporation (if known): POH0005968/
THIRD:	The file date of the articles of incorporation: 04/06/04
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.
Signa	(By a director, president or other officer - if directors or officers have hat been selected, by an incorporator - if in the hands of a receiver, trustee, or other cour appointed fiduciary, by that fiduciary.) (Typed or printed name of person signing) (Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the disse against this corporation as provided	olved corporation r l in s. 607.1407, F.S	named below for res	olution of payment of t	unknown claims
This "Notice of Corporate Dissolut	ion" is optional and	d is not required wh	en filing a voluntary di	ssolution.
Name of Corporation:	uong_Ai	Ngo, Diss.	& Arronates	-, P.A.
Date of dissolution will be the date specified in the Articles of Dissolut	the dissolution is fi	•		•
Description of information that mus	st be included in a d	claim:		
	·			
	· ,			
			<u> </u>	
			·	<u>.</u>
Mailing address where claims can b	e sent: (Claims car	nnot be sent to the D	vivision of Corporations	3)
515	Edubrok	. Ln		
WPB	FR 3	33411		_
				_
	······································			_
A claim against the above named co within 4 years after the filing of this	orporation will be b notice.	varred unless a proce	eding to enforce the cla	aim is commenced
Twong ai Ngo			m	R
Printed Name of the !	Person Filing		Signature of the Person l	filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00