

207720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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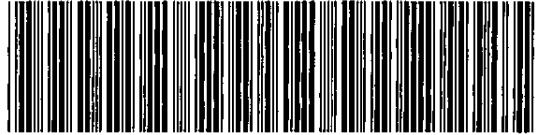
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SECRETARY OF STATE  
ALLAHASSEE, FLORIDA

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11/4/08

**THERREL BAISDEN, P.A.**

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BARON DE HIRSCH MEYER (1899 - 1974)  
LEO ROSE, JR. (1917 - 1998)  
CATCHINGS THERREL (1890 - 1971)  
MILTON WEISS (1913 - 1980)

WRITER'S EMAIL:  
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**October 28, 2008**

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**Florida Department of State  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**

**Re: Montanari Clinical School, Inc.  
Document Number 207720  
Our File No. 208138**

**Dear Sir:**

**Enclosed is:**

- 1. Articles of Dissolution; and**
- 2. Check to the order of the Florida Department of State in the amount of \$35.00, your fee.**

**Please indicate your receipt of this letter and the enclosures by stamping and returning the enclosed copy of this letter in the enclosed post-paid return envelope. Thank you.**

**Very truly yours,**

**THERREL BAISDEN, P.A.**

**By:**

**David Darlow**

**DD/rav**

**Enclosures**

**cc: Mrs. Marion G. Montanari  
Martin Sobel, CPA**

## 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:

MONTANARI CLINICAL SCHOOL, INC.

SECOND: The document number of the corporation (if known): 207720

THIRD: The date dissolution was authorized: September 15, 2008

Effective date of dissolution if applicable: \_\_\_\_\_  
(no more than 90 days after dissolution file date)

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 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)

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)

**Marion G. Montanari**

\_\_\_\_\_  
(Typed or printed name of person signing)

**President**

\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35**

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