

321364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

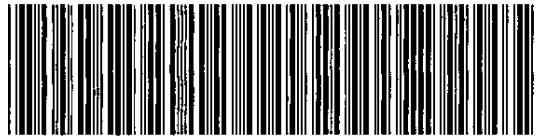
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Corrects document
by telephone call
on 6/15/09

Office Use Only



200156399722

200156399722
6-30-09

06/11/09--01029--013 **35.00

UD

09 JUN 11 AM 9:37

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

7:00 PM JUN 15 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF CORPORATION

DOCUMENT NUMBER: 321364

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

Please return all correspondence concerning this matter to the following:

W JOE FULLER

(Name of Contact Person)

W JOE FULLER DVM & ASSOCIATES PA

(Firm/Company)

5395 LAKE WASHINGTON ROAD

(Address)

MELBOURNE FL 32934-7811

(City/State and Zip Code)

For further information concerning this matter, please call:

W JOE FULLER

(Name of Contact Person)

at (321) 254-3675

(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

6-30-09

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:

W. JOE FULLER DVM & ASSOCIATES, PA.

SECOND: The document number of the corporation (if known): 321364

THIRD: The date dissolution was authorized: 6-4-09

Effective date of dissolution if applicable: 6-30-09
(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: W Joe Fuller

(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)

W JOE FULLER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUN 11 AM 9:37