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COVER LETTER

TO: Amendment Section

Division of Corporations	•	
Stanley J. Solomon	, P.A.	
DOCUMENT NUMBER:		
The enclosed Articles of Dissolution and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Stanley J. Solomon		
(Name of Conta	act Person)	
Stanley J. Solomon, P.A.		
(Firm/Company)		
3511 S. Peninsula Dr.		
(Addres	s)	
Port Orange, Fl. 32127		
(City/State and	d Zip Code)	
For further information concerning this matter, p	please call:	
	at (386) 672-7430	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Ce	43.75 Filing Fee & S52.50 Filing Fee, ertified Copy dditional copy is nclosed)	
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

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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: Stanley J. Solomon, P.A. EFFECTIVE PATE
SECOND:	The document number of the corporation (if known): The date dissolution was authorized: December 19, 2012
mico.	Effective date of dissolution if applicable: December 31, 2012 (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 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)
9	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, of other court appointed fiduciary, by that fiduciary)
	Stanley J. Solomon (Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35