548304

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	÷#)
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT COURS L Spelies DDS BA dissolution of Comp	7
DOCUMENT NUMBER: 548304	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Janis Tapkey (Name of Contact Person)	
(Name of Contact Person)	
George L. Spelios DDS BA (Firm/Company)	
13617 S. DIXIE LAMY#126	
Music, H. 33176 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Tanis Tapley at 305 238-1397 8	
(Name of Contact Person) (Area Code & Daytime Telephone Number)	Π
Enclosed is a check for the following amount:	
S35 Filing Fee \$\$\times\$\$\$\\$43.75 Filing Fee & \$\times\$	ユ フ
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:	
	George L. Spelios, DDS P.A.	····
SECOND:	The document number of the corporation (if known): 54830	24
THIRD:	The file date the articles of incorporation: $10-4-1977$	•
FOURTH:	(CHECK AT LEAST ONE BOX)	IAL O
	None of the corporation's shares have been issued.	06 APR 19 PM 12: 07
	The corporation has not commenced business.	19 F
FIFTH:	No debt of the corporation remains unpaid.	F S1
SIXTH:	The net assets of the corporation remaining after winding up have been dist to the shareholders, if shares were issued.	ribu 6
SEVENTH:	: Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	acture: X Ayre B seles	
Ü	(By a director, president or other officer - if directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	incorporator - if
	Jours B. Spelios	
	(Typed or printed name of person signing)	
	Shew-Les Rep.	
	(Title of Person Signing)	

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

lame of Corpora	tion: Opening 2. Spelis DDS, F.A.
	on will be the date the dissolution is filed with the Department of State or as rticles of Dissolution.
escription of inf	formation that must be included in a claim:
ailing address v	where claims can be sent: (Claims cannot be sent to the Division of Corporations)
	Toyer Spelios
	20304 Sw 79 Ct.
•••	Thea Fl. 33189

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Joyce Spelio'S

Printed Name of the Person Filing

Signature of the Person Filing

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