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08 JAN 24 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

diss

G. Coulllette JAN 29 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JOSEPH P BODO ARDDS PA

DOCUMENT NUMBER: NA

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

Please return all correspondence concerning this matter to the following:

JOSEPH P. BODO ARDDS
(Name of Contact Person)

JOSEPH P. BODO ARDDS
(Firm/Company)

7123 N. ARMBRIST AV.
(Address)

TAMPA, FL. 33604
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH P. BODO ARDDS at (813) 932-7939
(Name of Contact Person) (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

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:

JOSEPH P. BODO, JR., D.D.S., P.A.

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

THIRD: The file date of the articles of incorporation: 12/30/1977

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.

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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.)

JOSEPH P. BODO JR

(Typed or printed name of person signing)

PRESIDENT OWNER

(Title of Person Signing)

Filing Fee: \$35

JOSEPH P. BODO, JR., D.D.S., P.A.
7123 NORTH ARMENIA AVENUE
TAMPA, FLORIDA 33604
TELEPHONE 813 - 932-7939

December 31, 2007

Joseph P. Bodo, Jr., D.D.S., P.A.
7123 N. Armenia Avenue
Tampa, Florida 33604

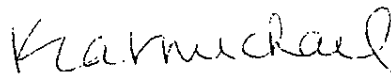
I, Joseph P. Bodo, Jr., D.D.S., do this day of December 31, 2007, dissolve my P.A.(professional association) corporation. Any residual assests in equipment supplies will be donated to charity or reimbursed at time of my retirement from practice at this location.

As of January 1, 2008, my P.A. will remain, but it will designate practice account.

Sincerely,

A handwritten signature in dark ink, appearing to read "JPB, Jr.", with a stylized flourish at the end.

Joseph P. Bodo, Jr., D.D.S.

A handwritten signature in dark ink, appearing to read "Kathryn Carmichael", written in a cursive style.

Kathryn Carmichael
witness