

605170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

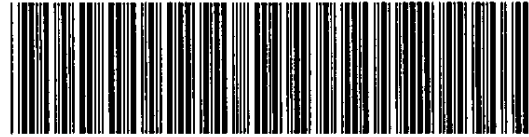
(Business Entity Name)

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*Revocation of  
diss*

06/04/13--01004--013 \*\*35.00

FILED  
2013 JUN -4 PM 1:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
13 MAY 30 AM 10:58  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*6/4/13*

**Nancy C. Bruemmer**

4214 Swann Avenue  
Tampa, FL 33609

Phone 813-362-1663

May 27, 2013

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
P.O. Box 6327  
Tallahassee FL 32314

RE: REVOCATION OF DISSOLUTION OF CORPORATION

Gentlemen:

Enclosed please find Articles of Revocation of Dissolution for a Florida Profit Corporation, along with the original Articles of Dissolution which were filed April 19, 2013.

Since the business of this correspondence also occurred in proximity of the due date of the annual Corporation Report Payment Voucher, the voucher and check were not mailed to the Division of Corporations. I am now making that payment also, since I am presuming that my request for the Revocation will be on file in your office.

I hope all of this will successfully conclude our business for the present time.

Kind Regards,

*Nancy C. Bruemmer, M.D., P.A.*

Nancy C. Bruemmer, M.D., P.A.

Encl:  
Chk #1242 \$35.-  
Chk #1243 \$150.-

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** NANCY C. BRUEMMER, M.D., P.A.

**DOCUMENT NUMBER:** 605170

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

Please return all correspondence concerning this matter to the following:

Nancy C. Brummer, M.D., P.A.  
Name of Contact Person

Nancy C. Brummer, M.D., P.A.  
Firm/Company

4214 SWANN AVENUE  
Address

Tampa FL 33609  
City/State and Zip Code

drbrummer@g-mail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nancy C. Brummer At ( 813 ) 362-1663  
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 REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

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2013 JUN -4 PM 1:08

FIRST: The name of the corporation is:

NANCY C. BRUEMMER, M.D., P.A.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

605170

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is

4-19-13

FOURTH: The Revocation of Dissolution was authorized on

5-7-13

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☒ The board of directors revoked the dissolution.  
☐ The incorporators revoked the dissolution.  
☐ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization.  
☐ The shareholders revoked the dissolution and the number of votes cast was sufficient for approval.  
☐ The shareholders revoked the dissolution by voting groups - the number of votes cast by \_\_\_\_\_ was sufficient for approval.

(Voting group)

SIXTH: A copy of the Articles of Dissolution is attached.

Signature

Nancy C. Brummer, M.D., P.A. Pres.

(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)

Nancy C. Brummer

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35

## 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:

Nancy C. Bruemmer, M.D., P.A.

SECOND: The document number of the corporation (if known): 605170

THIRD: The file date of the articles of incorporation: 5-20-1974

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.

Signature: \_\_\_\_\_

Nancy C. Bruemmer, M.D. Pres.

(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.)

Nancy C. Bruemmer, M.D.

(Typed or printed name of person signing)

President

(Title of Person Signing)

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FILED  
13 APR 19 PM 12:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA