

09 675378

Page 1 of 1



FILED
2007 DEC 11 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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H07000296923 3

ARTICLES OF DISSOLUTION 2007 DEC 11 PM 4:21

Pursuant to section 607.14-03, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:
BELCHER'S WESTSIDE ANIMAL HOSPITAL, P.A.

SECOND: The document number of the corporation (if known): 675378

THIRD: The date dissolution was authorized: May 31, 2007

Effective date of dissolution if applicable: _____
(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: Wallace F. Belcher
(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)

Wallace F. Belcher

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

H07000296923 3

H07000296923 3

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.

Name of Corporation: BELCHER'S WESTSIDE ANIMAL HOSPITAL, P.A.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Name of claimant

Amount owed to claimant

Explanation of basis of claim/debt

Invoice (or copy of invoice if previously submitted)

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

c/o Wallace R. Belcher

1805 Southbay Drive

Pensacola, FL 32506

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.

Wallace R. Belcher, PRESIDENT

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

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