744744

(Re	equestor's Name)	
(Ad	dress)	
	Idress)	40
<u></u>	ty/State/Zip/Phone	#) MAIL
·	siness Entity Nam	ne)
(Do Certified Copies	cument Number) Certificates	of Status
Special Instructions to	Filing Officer:	

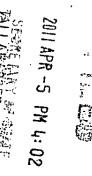
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corpora	ition	
DOCUMENT NUMBER: F44744		
The enclosed Articles of Dissolution and f	ee are submitted for	filing.
Please return all correspondence concerning	g this matter to the f	following:
Mark H Hinman		
(Name of	Contact Person)	
MH Hinman DDS PA		
(Fire	n/Company)	
110 North River Dr East		
(A	ddress)	**************************************
Jupiter, FL. 33458		
(City/Sta	te and Zip Code)	
For further information concerning this ma	tter, please call:	
Mark Hinman	at (_561	744-3270
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:	
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certificate of Status &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	1	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:	
	MH. Hinman DDS, PA.		
SECOND:	The document number of the corporation (if known): F44744		
THIRD:	The file date of the articles of incorporation: 12-3-1981		
FOURTH:	(CHECK AT LEAST ONE BOX)	NE SE	22
	None of the corporation's shares have been issued.		o C
	The corporation has not commenced business.) T
FIFTH:	No debt of the corporation remains unpaid.		
SIXTH:	The net assets of the corporation remaining after winding up have been district to the shareholders, if shares were issued.	ributed	7
SEVENTH:	: Adoption of Dissolution (CHECK ONE)		
	A majority of the incorporators authorized the dissolution.		
	A majority of the directors authorized the dissolution.		
Sign	(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.)	ncorporator - if	
	MH Hinman DDS PA		
	(Typed or printed name of person signing)		
	president		
	(Title of Person Signing)		

Filing Fee: \$35