G36249

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #	,
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of	Status
Special Instructions to Filing Officer:	
	}

Office Use Only



300056197853

06/17/05--01023--024 **35.00

DS JUN 17 AM 8: 39

or vol.

COVER LETTER

Division of Corporations		
SUBJECT: Dissidution of Corporation		
DOCUMENT NUMBER:		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Leif Lohrbauer, H.D. (Name of Person)		
Janksonville Cardiovascular Clinic, P.A. (Name of Firm/Company)		
4200 Yacht Club Road (Address)		
Jacksonville, FL 32210 (City/State/and Zip Code)		
(City/State/and Zip Code)		
For further information concerning this matter, please call:		
Leif Lohrbauer, M.D. at (904) 805-9600 (Name of Person) (Area Code & Daytime Telephon	<u> </u>	
	e Number)	
Enclosed is a check for the following amount:		
\$35 Filing Fee \$43.75 Filing Fee & \$52.50 Filing Fee & \$52.50 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional copy enclosed)	atus &	
MAILING ADDRESS: Amondment Section		
Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327 409 E. Gaines Street		

Tallahassee, Florida 32314

409 E. Gaines Street

Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:
	TACKSONVIlle Cardiovascular Clinic, P.A.
SECOND:	The document number of the corporation (if known): 536049
THIRD:	The date dissolution was authorized: 71104 55 5 7
	Effective date of dissolution if applicable: 12/31/04
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolutio was sufficient for approval.
	Dissolution was approved by of 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
	the shareholders. (voting group)
	Signed this day of
	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)
	LEIF A. Lohrbauer
	(Typed or printed name of person signing)
	marging bartra Jochmole
	(Title of person signing)
	Filing Fee: \$35