

G99187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

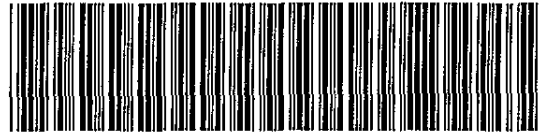
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FILED  
03 APR 18 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dissolution

T BROWN APR 25 2003

**MARK NORDEN**  
**BOARD CERTIFIED CIVIL TRIAL LAWYER**  
**CERTIFIED CIVIL COURT MEDIATOR**

Post Office Box 1529  
Fort Myers, Florida 33902-1529

(239) 332-7100  
FAX (239) 482-5067

April 14, 2003

STATE OF FLORIDA  
Division of Corporations  
Amendment Section  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Dissolution of Mark Norden, P.A.

Dear Sir or Madam:

Attached is an executed "Articles of Dissolution" for Mark Norden, P. A.

Also enclosed are checks in the amount of thirty-five (\$35.00) dollars reflecting the appropriate filing fee and a check in the amount of eight (\$8.75) dollars and seventy-five cents for a "Certificate of Status".

Sincerely,

MARK NORDEN

## 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 is: MARK NORDEN, P.A.

SECOND: The date dissolution was authorized: April 14, 2003

THIRD: 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 vote 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

\_\_\_\_\_  
(voting group)

Signed this 14<sup>th</sup> day of April, 2003.

Signature \_\_\_\_\_

(By the Chairman or Vice Chairman of the Board, President, or other officer)

MARK NORDEN

(Typed or printed name)

PRESIDENT

(Title)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA