## · L34710

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2005 APR 27 PM 2-22

(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





500051353925

04/27/05--01012--024 \*\*43.75

16His

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
•	on-Mandarian Internal Medicine, PA	
Sobale 1		
DOCUMENT NUMBER: L34710		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning	g this matter to the following:	
Robert G. Hetsler, Jr.		
(Name of Person)		
Hetsler Mediation & Valuation, Inc.		
(Name of Firm/Company)		
10151 Deerwood Park Blvd, Bldg 200, Ste 250		
(Address)		
Jacksonville, FL 32256		
(City/State/and Zip Code)		
For further information concerning this matter, please call:		
Robert G. Hetsler, Jr.	at (904) 564-1000 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:	
\$35 Filing Fee \$\ \tag{S43.75 Filing Fee &   \\ \text{Certificate of Status}	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations 409 E. Gaines Street	
Tallahassee, Florida 32314	Tallahassee, Florida 32399	

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following afterless PH 2:22 FIRST: The name of the corporation as currently filed with the Florida Department of State: Mandarian Internal Medicine, P.A. The document number of the corporation (if known): L34710 SECOND: The date dissolution was authorized: 4/8/05 THIRD: 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 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 Edith M. Ortega (voting group) Signed this 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) Power of Attorney For EdAh M. Ortega.
(Title of person signing)

Filing Fee: \$35