M79510

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	e #)
, ,	·	,
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SECRETARY OF STATE
TALL///#SSES./10RIDA

Dissolution of Inactive

MAR 1 9 2014 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Articles of Disso	lution	
DOCUMENT NUMBER: M79510	<u> </u>	
The enclosed Articles of Dissolution and	fee are submitted for filin	g.
Please return all correspondence concernir	ng this matter to the follow	ving:
Adam A. Czaya, Esq.		
(Name of	Contact Person)	
Law Office of Keith R.	Гaylor, Р.А.	
(Fir	m/Company)	
P.O. Box 2016		
(A	Address)	
Lecanto, Florida 34460		
(City/Sta	ate and Zip Code)	
For further information concerning this ma	atter, please call:	
Paul Cash	at (352) 7	95-3212
(Name of Contact Person)	(Area Code &	Daytime Telephone Number)
Enclosed is a check for the following amount	unt:	
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section		EET ADDRESS:
Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661	Executive Center Circle

Tallahassee, FL 32301

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: Meadowcrest Family Practice, P.A.			
SECOND:	The document number of the corporation (if known): M79510			
THIRD:	The date dissolution was authorized: November 7, 2013			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution	n file date)	_	
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution	on	
	☐ Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group of to vote separately on the plan to dissolve:	entitled		
	The number of votes cast for dissolution was sufficient for approval by			
		14	TAL	
	(voting group)	4 MAR	CRET	
	·.	17 F	ARY (
	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)	AM 10: 37	OF STATE	
	John R. Degraw			
	(Typed or printed name of person signing)			
	PSTD (Title of person signing)			

Filing Fee: \$35