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(Requestor's Name) (Address) (Address)	400133266124
(City/State/Zip/Phone #)	07/23/0801006003 **35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	THE ED 2008 JUL 23 AM 11: 05 SECRE TARY OF STATE TALLAHASSEE, FLORID,
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COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: Articles of Dissolution

DOCUMENT NUMBER: N00564

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Grant Hurst

(Name of Contact Person)

The Non-Profit Hospitals' Venture, Inc.

(Firm/Company)

2618 W. Bay Drive

(Address)

Largo, FL 33770

(City/State and Zip Code)

For further information concerning this matter, please call:

Grant Hurst

(Name of Contact Person)

at (<u>727</u>) <u>518-7639</u> (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☑ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is

MAILING ADDRESS:

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section **Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

enclosed)

FILED 2008 JUL 23 AM 11:05 SECRETARY OF STATE ALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

The Non-Profit Hospitals' Venture, Inc.

SECOND: The document number of the corporation (if known): N00564

THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II)

SECTION I If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

The date of the meeting of members at which the resolution to dissolve was adopted

May 16, 2008 ______. The number of votes cast by the members was sufficient for approval.

The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was _____.

The number of directors in office was_____ and the vote for resolution was

_____ for and _____ against. (must be a majority vote)

FOURTH:

Effective date of dissolution if applicable:

6/30 8

(no more than 90 days after dissolution file date)

Signature

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Grant Hurst

(Typed or printed name of the person signing)

Secretary/Director

(Title of person signing)

FILING FEE: \$35