

N01000008790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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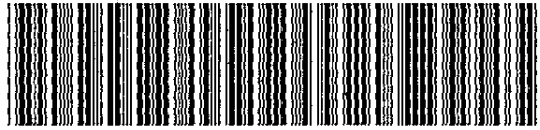
(Business Entity Name)

(Document Number)

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04 AUG 16 PM 3 31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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8/18  
A. J. ...

Jeb Bush  
Governor



John O. Agwunobi, M.D., M.B.A.  
Secretary

Lillian Rivera, RN, MSN, Administrator

August 11, 2004

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

TO WHOM IT MAY CONCERN:


Please find attached supporting documents to dissolve the Miami-Dade County Health Department Employee Association, Inc. The appropriate filing fee is enclosed for \$35.00.


If you need further information, please feel free to contact me at:

Beacon Center  
Miami-Dade County Health Department  
8323 NW 12<sup>th</sup> Street – Suite 212  
Miami, Florida 33126  
Telephone: 786-336-1278

Thank you.

Sincerely,

  
Helen F. Sharperson  
President  
MDCHD Employee Association, Inc.

  
Lillian Rivera, RN, MSN  
Administrator

hfs/lr

Attachments

**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 is THE MIAMI-DADE COUNTY HEALTH DEPARTMENT Employee Association, Inc.  
MDCHD Employee Association, Inc.

SECOND: Adoption of dissolution  
(Complete Section I or II)

**SECTION I**  
If the corporation has members entitled to vote:

The date of the meeting of members at which the resolution to dissolve was adopted  
August 11, 2004

(CHECK ONE)

- The number of votes cast for dissolution was sufficient for approval.
- The resolution was adopted by written consent and executed in accordance with section 617.0701, Florida Statutes.

**FILED**  
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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**SECTION II**  
If the corporation has no members or members with voting rights:

The corporation has no members or members with voting rights.

The date of adoption of the resolution by the board of directors was \_\_\_\_\_

The number of directors in office was \_\_\_\_\_ and the vote for the resolution was \_\_\_\_\_ for and \_\_\_\_\_ against.

Signed this 11<sup>th</sup> day of August, 2004.

Signature Helen F. Sharperson  
(By the Chairman or Vice Chairman of the Board, President or other officer)

Helen F. Sharperson  
(Typed or printed name)  
President  
(Title)