

NO. 3000004564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

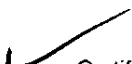
☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies



Certificates of Status



Special Instructions to Filing Officer:

Office Use Only

11-18-09



500162709075

11/16/09--01058--019 \*\*52.50

EFFECTIVE DATE  
12-31-09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 NOV 16 PM 10:24

FILED

D.S.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of Corporation

**DOCUMENT NUMBER:** N03000004564

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

Please return all correspondence concerning this matter to the following:

Lora Van Meir

(Name of Contact Person)

Heart Center of the Treasure Coast

(Firm/Company)

330 17th Street

(Address)

Vero Beach FL 32960

(City/State and Zip Code)

For further information concerning this matter, please call:

Lora Van Meir

(Name of Contact Person)

at (772) 542-6161

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$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  
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

## ARTICLES OF DISSOLUTION

EFFECTIVE DATE  
12-31-09

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:

Treasure Coast Research Foundation, Inc.

SECOND: The document number of the corporation (if known): N03000004564

THIRD: The date dissolution was authorized: 10-21-09

Effective date of dissolution if applicable: 12-31-09  
(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 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)

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)

Charles Celano, MD

(Typed or printed name of person signing)

Medical Director

(Title of person signing)

Filing Fee: \$35

2009 NOV 16 PM 10:24  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA