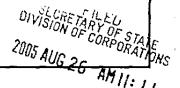
## N14440



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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, Florida 32314

Division of Corporations

SUBJECT: Island Medical Specialists Condominium Association, Inc. **DOCUMENT NUMBER: N14440** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: David E. Mathias (Name of Person) Health First, Inc. (Name of Firm/Company) 6450 US Highway 1 (Address) Rockledge, FL 32955 (City/State/and Zip Code) For further information concerning this matter, please call: at (321) 434-4378

(Area Code & Daytime Telephone Number) Kim Nowakowski (Name of Person) 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 & Certified Copy (Additional copy is (Additional copy is enclosed) enclosed) **MAILING ADDRESS: STREET ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations

409 E. Gaines Street

Tallahassee, Florida 32399

DIVISION OF CORPORATIONS

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## 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: Island Medical Specialists Condominium Association, Inc. The document number of the corporation (if known): N14440 SECOND: Adoption of Dissolution THIRD: (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 (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 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 May 16, 2005 The number of directors in office was 2 and the vote for resolution was for and <sup>0</sup> against. (must be a majority vote)

FOURTH	: Effective date of dissolution if applicable: August 31, 2005	
	(no more than 90 days after di	ssolution file date)
	Signed this day of	005
	Signature  (By the chairman or vice chairman of the board, president or other officer- it directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	<del></del>
	Gail Stalnaker	
	(Typed or printed name of the person signing)	
	President	
	(Title of person signing)	<del></del>

FILING FEE: \$35