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## **COVER LETTER**

Division of Corporations	· · · · · · · · · · · · · · · · · · ·
SUBJECT: Deborah	ZurSchmiede
DOCUMENT NUMBER: P0000006915	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Deborah Dodd -	ZurSchmiede
Deborah Dodd (Name of Conta)  Deborah Dodd (Firm/Conta)	Turschmiede
(Firm/Company)	
2729 Blairstone Lane (Address)  Tallahassee Fl. 32301	
Tallahassee I	<u>1. 32301</u>
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Deborak Zur Schmiede	at (850) 671-4646
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	Α.,
(Ac	3.75 Filing Fee & \$\frac{1}{2}\$\$52.50 Filing Fee, rtified Copy Iditional copy is closed) \$\frac{1}{2}\$\$\$\$ (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section 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

FILED

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the 1510 Wing: 00 articles of dissolution: SECRETARY OF STATE TALLAHASSEE, FLORIDA FIRST: The name of the corporation as currently filed with the Florida Department of State: The document number of the corporation (if known): <u>POOOOOO</u>6915 SECOND: The file date of the articles of incorporation: 1 - 21 - 2000THIRD: FOURTH: (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid. SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. SEVENTH: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. 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.) Title of Person Signing)

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Deborah Dodd Zur Schmieder, P. H. D., P. A.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Deborah Dodd ZurSchmiede 2729 Blairstone Lane Tallahassee, Fl. 32301

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Printed Name of the Person Filing

Signature of the Person Filing