

P00000015103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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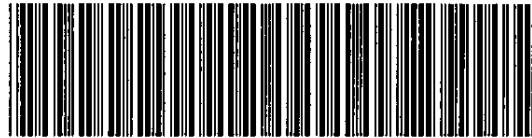
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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12-26-06

COVER LETTER

TO: Amendment Section
Division of Corporations

CORP.NAME: Brian A. Schofield, M.D., P.A.

**DOCUMENT
NUMBER:** P00000015103

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

Please return all Correspondence concerning this matter to the following:

Graeme Gorrie
(Name of Contact Person)

GT Associates, LLC
(Firm/Company)

2822 Proctor Road Suite A
(Address)

Sarasota, FL 34231
(City/State and Zip Code)

For further information concerning this matter, please call:

Graeme Gorrie
(Name of Contact Person)

941-924-8577
(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35 for the filing fee.

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

ARTICLES OF DISSOLUTION

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:

Brian A. Schofield, M.D., P.A.

SECOND: The document number of the corporation:

P00000015103

THIRD: The date dissolution was authorized:

12/18/2006

FOURTH: Adoption of Dissolution (CHECK ONE):

X

Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

N/A

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

Signature: ✓

(voting group)

Brian A. Schofield

(Typed or printed name of person signing)

President

(Title of person signing)

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Filing Fee: \$35