P00000019421

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SECRETARY OF STATE,
TALLAHASSEF F. STATE,

119,000 UAN 0.4 7898

COVER LETTER **TO:** Amendment Section Division of Corporations SUBJECT: Clemens W. Pauly, P.A. DOCUMENT NUMBER: P00000019421 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Clemens W. Pauly Langstadt Pauly Chartered (Firm/Company) 815 Ponce de Leon Blvd. (Address) Coral Gables, FL 33134 (City/State and Zip Code) For further information concerning this matter, please call: at (305) 648-3909 (Area Code & Daytime Telephone Number) Clemens W. Pauly (Name of Contact 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 Certificate of Status & Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

12/31/05

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:
	Clemens W. Pauly, P.A.
SECOND:	The document number of the corporation (if known): P0000019421
THIRD:	The date dissolution was authorized: 12/20/2005
	Effective date of dissolution if applicable: 12/31/2005 (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 of 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)
	Clemens W Pauly
	(Typed or printed name of person signing)
	Director EFF P
	(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: Clemens W. Pauly, 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:
Name, address and telephone number of claimant, description of nature
of claim and amount claimed.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Langstadt Pauly Chartered
815 Ponce de Leon Blvd.
Suite P-205
Coral Gables, FL 33134
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.
Clemens W. Pauly Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00