P0000033119

(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:	





700012585687

02/25/03--01059--008 **35.00

03 FEB 25 PM 3: 06

B 2/25/03

***************************************	2/20/03
	Devision of Corporations Florida Dept of State PO Box 6327 Dallahansee, FL 32314
	RE: Pobert Lown, P.A.
	To Whom it May Concern:
	Enclosed place find my dititles of Dissolution. I would like to voluntarily dissolve my corporation ROBERT L. CROWN, A.A. of you bave any questions or need additional information, then you are contact me at:
	ROB CROWN
1	4484 ROSEA CT. NAPLES, FL 34104 (239) 261-4969.
	Hank you,
:	Dobert L Louis

also enclosed in the filing fee of \$35.00

ARTICLES OF DISSOLUTION

FILED

03 FEB 25 PM 3: 06

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the E. FLORIDA following articles of dissolution:

FIRST:	The name of the corporation is: KORERT L. CROWN, P.A.
SECOND:	The date dissolution was authorized: () & (o &
THIRD:	Adoption of Dissolution (CHECK ONE)
回 Diss was	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
☐ Diss	solution was approved by vote of the shareholders through voting groups.
	The following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
	(voting group)
	(voting group)
Sig	med this 20 day of FEBRUARY, 2003.
Signature _	(By the Chairman or Vice Chairman of the Board, President, or other officer)
	(Typed or printed name)
	PRESIDENT (Title)