

P00000053799

BOONE, BOONE, BOONE, HINES & KODA, P.A.

P. O. BOX 1596

VENICE, FLORIDA 34284

ESTABLISHED 1956

E.G. (DAN) BOONE  
JEFFERY A. BOONE  
STEPHEN K. BOONE  
CHARLES D. HINES  
JOHN S. KODA  
PEGGY S. FROOK

June 21, 2000

STREET ADDRESS:  
1001 AVENIDA DEL CIRCO 34285  
TELEPHONE (941) 488-6716  
FAX (941) 488-7079  
e-mail: adm@boone-law.com

Secretary of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32301

400003305494--7  
-06/26/00--01161--006  
\*\*\*\*\*43.75 \*\*\*\*\*43.75

Re: Articles of Dissolution - Barry J. Weckesser,  
M.D., P.A.

Dear Sir or Madam:

Enclosed for filing are Articles of Dissolution for the above-named corporation, as well as an extra copy of Articles for certification and return to us. Our check in the amount of \$43.75 covering filing and certified copy is also enclosed.

Thank you for your assistance.

Very truly yours,

*Stephen K. Boone*

Stephen K. Boone

ab  
enclosures

f:\4381\sectltr0621  
W70-4381

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 JUN 26 AM 9:32

Voldis

V. SHEPARD JUL 12 2000

ARTICLES OF DISSOLUTION  
OF  
BARRY J. WECKESSER, M.D., P.A.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 JUN 26 AM 9:32

Pursuant to Section 607.1403 of the Florida Business Corporation Act of Florida, the undersigned corporation adopts these Articles of Dissolution.

ARTICLE I.  
NAME

The name of the corporation is BARRY J. WECKESSER, M.D., P.A..

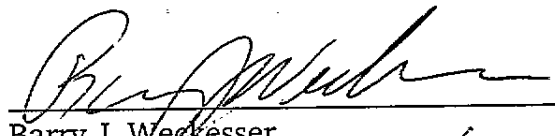
ARTICLE II.  
DISSOLUTION AUTHORIZED

Dissolution of the corporation was authorized on June 6, 2000.

ARTICLE III.  
SHAREHOLDERS' APPROVAL

The number of votes cast by the shareholders (a unanimous vote) for dissolution was sufficient for approval.

Dated this 19<sup>th</sup> day of June, 2000.

  
\_\_\_\_\_  
Barry J. Weckesser  
Sole Stockholder and Director/President

STATE OF FLORIDA )  
COUNTY OF SARASOTA )

The foregoing instrument was acknowledged before me this 19<sup>th</sup> day of June, 2000, by BARRY J. WECKESSER, sole Stockholder and Director of BARRY J. WECKESSER, M.D., P.A., on behalf of the corporation, who is personally known to me or who produced DRIVERS LICENSE as identification.

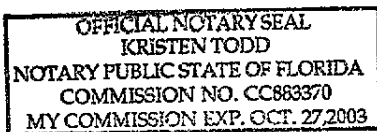
NOTARY PUBLIC

Sign

Print

Kristen Todd  
KRISTEN TODD

My Commission Expires:  
(SEAL)



f:\client\4381\disolve  
w70-4381