

P00 000054262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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03/22/11--01003--013 **35.00

11 mar 31 AM 8:37
SECRETARY OF STATE
TALLAHASSEE, FL 32399

APPROVED
FILED

Dis 4/6/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of HealthPoint Acupuncture PA

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

L.R. Brown

(Name of Contact Person)

(Firm/Company)

P.O. Box 1032

(Address)

Sharpes, FL 32959

(City/State and Zip Code)

For further information concerning this matter, please call:

Lawrence

(Name of Contact Person)

at (321)

8907255

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 23, 2011

L.R. BROWN
P.O. BOX 1032
SHARPES, FL 32959

SUBJECT: HEALTHPOINT ACUPUNCTURE, P.A.
Ref. Number: P00000054262

We have received your document for HEALTHPOINT ACUPUNCTURE, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the date the dissolution was authorized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 511A00007054

RECEIVED
11 MAR 31 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following a of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

HealthPoint Acupuncture P.A.

SECOND: The document number of the corporation (if known): P00000054262

THIRD: The date dissolution was authorized: 2010/12/31 By the entire Board I all share

Effective date of dissolution if applicable: 2010/12/31

(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 dissol was sufficient for approval.

☐ 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

(voting group)

Signature: [Signature] 2011/03/18

(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)

L.R. Brown

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

H1502

SECRETARY OF STATE
TALLAHASSEE, FLORIDA