

P000000069073

Requester's Name

____ Pollard
____ P.O. Box 1041
____ Wewahatcha, Fl.
32465

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #) 600004495486--9
-07/25/01--01058--011
*****25.00 *****25.00

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #) 600004495486--9
09/17/01--01001--026
*****10.00 *****10.00

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED
01 SEP 17 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DISS

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 30, 2001

Tonya G.S. Pollard
P.O. Box 1041
Wewahitchka, FL 32465

SUBJECT: TONYA G.S. POLLARD, DDS, P.A.
Ref. Number: P00000069073

We have received your document for TONYA G.S. POLLARD, DDS, P.A. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted is a dissolution document for a Florida limited liability company. As the subject corporation is a Florida profit corporation, enclosed are the correct guidelines. Please also return an additional fee of \$10 as the fee to dissolve the subject corporation is \$35.

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) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 001A00044026

ARTICLES OF DISSOLUTION

FILED
01 SEP 17 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FIRST: The name of the corporation is: Tonya G. S. Pollard, DDS, P.A.

SECOND: The date dissolution was authorized: 7-22-01

THIRD: 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 vote 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

Tonya G. S. Pollard
(voting group)

Signed this 24 day of August, 2001.

Signature Tonya Pollard
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Tonya Pollard
(Typed or printed name)

Incorporator
(Title)