

PO 0000107449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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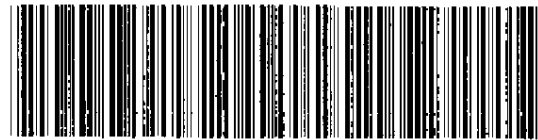
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL GARDEN MEDICAL GROUP INC

DOCUMENT NUMBER: P00000107449

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

Please return all correspondence concerning this matter to the following:

DR LAILA CHAGANI

(Name of Contact Person)

(Firm/Company)

18168 NW 89 PL

(Address)

HEALTH FL 33018

(City/State and Zip Code)

For further information concerning this matter, please call.

DR LAILA CHAGANI

at (

305-308-7897

(Name of Contact Person)

(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

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building

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.

ALI GARDEN MEDICAL GROUP INC

SECOND- The document number of the corporation (if known): P00000107449

THIRD: The date dissolution was authorized: 03/24/2017

Effective date of dissolution if applicable: 03/24/2017
(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 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

(3) $\mathcal{C}(\mathbb{R}^2, \mathbb{R}) \cong \mathcal{C}(\mathbb{R}, \mathbb{R})$

Signature: _____

Laila Chagani

(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.)

DR LAHLA CHAGANI

(Typed or printed name of person signing)

DISCUSSION