Paro 1/2/20

(Re	questor's Name)			
(Address)				
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FI ORIDA

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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 11, 2009

LINDA WRIGHT WILSON BIRTHROOT, INC. 5355 HAMMOCK DR. CORAL GABLES, FL 33156

SUBJECT: BIRTHROOT, INC. Ref. Number: P00000112420

We have received your document for BIRTHROOT, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

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If you have any theother

Letter Number: 909A00004882

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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KECEINED

COVER LETTER

TO: Amendment Section Division of Corporations

RECEIVED 2009 FEB -5 AM 8: 00 SECRETARY OF

SUBJECT: Dissolution of Birthroc	ot, Inc.	ALLAHASSEE. FLORIDA
SOBULOI.		
DOCUMENT NUMBER: P0000011	2420	····
The enclosed Articles of Dissolution and	fee are submitted for filin	g.
Please return all correspondence concerning	ng this matter to the follow	ving:
Linda Wright Wilson		
(Name of	Contact Person)	
Birthroot, Inc		
(Fir	m/Company)	
5355 Hammock Drive		
(A	Address)	
Coral Gables, FL 33156		
(City/St	ate and Zip Code)	
For further information concerning this ma	atter, please call:	
George Wilson	at (_305) 9	75 0622
(Name of Contact Person)	(Area Code &	Daytime Telephone Number)
Enclosed is a check for the following amo	unt:	
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STR	CET ADDRESS:

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

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

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:			
	Birthroot, Inc				
SECOND:	The document number of the corporation (if known): P00000112420				
THIRD:	The date dissolution was authorized: January 1, 2009				
	Effective date of dissolution if applicable: January 1, 2009 (no more than 90 days after dissolution)	n file date)			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for disso	olutio	1	
	Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled			
	The number of votes cast for dissolution was sufficient for approval by	SECRETA ALLAHAS	09 HAR 10 PH 2:49		
	(voting group)	SEE.	0 7		
	Signature: (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	FLORIDA	H 2: 49	•	
	that fiduciary)				
	Linda Wright Wilson				
	(Typed or printed name of person signing)				
	Director				
	(Title of person signing)				

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of C	Corporate Dissolution" is optional and is not	required when filing a voluntary dissolution	n.
Name of Corpora	tion: Birthroot, Inc		
	on will be the date the dissolution is filed wit articles of Dissolution.	th the Department of State or as	
Description of in	formation that must be included in a claim:		
Proof of cla	im.		
			
Mailing address	where claims can be sent: (Claims cannot be	sent to the Division of Corporations)	
į.	5355 Hammock Drive		
-	Coral Gables, FL 33156		
_			
_			
	the above named corporation will be barred user the filing of this notice.	unless a proceeding to enforce the claim is o	commenced
		D. N. N. N	
Linda Wrigh		Judahle	
	Printed Name of the Person Filing	Signature of the Person Filing	

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00