

PG00000113213

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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December 21, 2006

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

RE: North Ridge Professional Center, Inc.

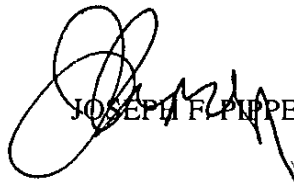
Dear Sirs:

The enclosed Articles of Dissolution and fee are submitted for filing. Included is my check in the amount of \$35.00 for this service. If you have any questions regarding the above, or if you need any further information, please contact me at (727) 586-3306.

Thank you for your assistance.

Kindest regards.

Sincerely,


JOSEPH F. PIPPEN, JR.

JFP:pw
ENC.

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:

NORTH RIDGE PROFESSIONAL CENTER, INC.

SECOND: The document number of the corporation (if known): **P00000113213**

THIRD: The date dissolution was authorized: **December 1, 2006**

Effective date of dissolution if applicable: **December 31, 2006**

(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 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

BOARD OF DIRECTORS AND SHAREHOLDERS

(voting group)

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 that fiduciary)

BRUCE A. DAVIS

(Typed or printed name of person signing)

SHAREHOLDER, DIRECTOR

(Title of person signing)

Filing Fee: \$35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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