PD100000414

(Re	equestor's Name)	
, (A d	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone) #)
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissive curporation
DOCUMENT NUMBER: POI 000004114
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Adle
(Name of Contact Person)
(Firm/Company)
(Firm/Company) 12959 Palms West Drive Svite 130 (Address)
Loxahathel, FC 33470
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (S61) 793-5657 (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy Certificate of Status & (Additional copy is enclosed) (Additional copy is
enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Control of Corporations Clifton Building Control of Corporations Control of Corporations Control of Corporations Control of Corporations Clifton Building Control of Corporations Control of Control of Control of Corporations Con

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:
	Comprehensive OB/CYN, PA
SECOND:	The document number of the corporation (if known): POIO004/14
THIRD:	The file date of the articles of incorporation: //8/7001
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	☐ The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	☐ A majority of the directors authorized the dissolution.
Sign	ature: Mikuttu
J.5	(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.)
	David Anter GARGORY A. LATTERHAN
	(Typed or printed name of person signing)
	PSTD MBR
	(Title of Person Signing)

Filing Fee: \$35