## PD1000031295

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## TRANSMITTAL LETTER

TRANSMITTAL LETTER
TRANSMITTAL LETTER  TO: Amendment Section Division of Corporations  SUBJECT: DISSOLUTION OF CORPORATION.
SUBJECT: DISSOLUTION OF CORPORATION.
DOCUMENT NUMBER: P01000031295
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
HARESH P. SOLANKI
(Name of Person)
HARESH P. SOLANKI, MD. PA
(Name of Firm/Company)
2028 TRAILING PINE WAY
(Address)
ORANGE PARK, FL 32003.
(City/State/and Zip Code)
For further information concerning this matter, please call:
HARESH P. SOLANKI OR  DEVBALA H. SOLANKI at (904) 542-7753  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
,
□ \$35 Filing Fee \$\$\frac{1}{2}\$
MAILING ADDRESS:  Amendment Section  Division of Corporations  P.O. Box 6327  STREET ADDRESS:  Amendment Section  Division of Corporations  409 E. Gaines Street

Tallahassee, Florida 32399

Tallahassee, Florida 32314

## 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 Department of State:	
	HARESH P SOLANKI, MD, PA	
SECOND:	The document number of the corporation (if known): POIOOO031295	
THIRD:	The file date of the articles of incorporation was: 327 2001	
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.	
	Signed this 15 day of DECEMBER , 2003.	
Signature: Leeb L/m.		
	(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.)	
	HARESH P. SOLANKI	
	(Typed or printed name of person signing)	
	PRESIDENT.	
	(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 Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation:\_ HARESH P. SOLANKI, MD, PA Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

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