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## LISA MCNAUGHTON

5005 Kingswood Drive Lakeland, FL 33813 863-647-1281

November 18, 2002

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

Dear Division,

Enclosed is the form of dissolution of my corporation. If you have any questions, please call me at 863-647-1281.

Sincerely,

Lisa McNaughton President



## FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 6, 2002

LISA MCNAUGHTON 5005 KINGSWOOD DRIVE LAKELAND, FL 33813

SUBJECT: CENTRAL FLORIDA INTEGRATIVE HEALTHCARE

Ref. Number: W02000034284

We have received your document for CENTRAL FLORIDA INTEGRATIVE HEALTHCARE and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records show no entity by this name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Letter Number: 402A00064824

Carol Mustain Document Specialist

## 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 is: Lisa McNaughton A.P., P.A.	
SECOND:	The date dissolution was authorized: November 18, 2002	
THIRD:	Adoption of Dissolution (CHECK ONE)	02 DEC 23
	solution was approved by the shareholders. The number of votes sufficient for approval.	cast for dissolution STAL STAL
Dis:	solution was approved by vote of the shareholders through voting	
	he following statement must be separately provided for each votin ntitled to vote separately on the plan to dissolve:	ng group
The	number of votes cast for dissolution was sufficient for approval b	уу
F	resident	
	(voting group)	
Sig	ned this 18 day of November	2002
Signature _	By the Chairman or Vice Chairman of the Board, President, or other officer)	·
	Lisa McNaughton	
	(Typed or printed name)	
	President	
	(Title)	