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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles of Dissolution

**DOCUMENT NUMBER:** P01000078560

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Swathi Rao

(Name of Contact Person)

Hema Rao, M.D., P.A.

(Firm/Company)

981 37th Place

(Address)

Vero Beach, FL 32960

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Swathi Rao

(Name of Contact Person)

at (772) 299-4255

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 3, 2009

SWATHI RAO  
HEMA RAO, M.D., P.A.  
981 37TH PLACE  
VERO BEACH, FL 32960

SUBJECT: HEMA RAO, M.D., P.A.  
Ref. Number: P01000078560

We have received your document for HEMA RAO, M.D., P.A., 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.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 309A00011363

## 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:

Hema Rao, M.D., P.A.

SECOND: The document number of the corporation (if known): P01000078560

THIRD: The date dissolution was authorized: 3/20/2009

Effective date of dissolution if applicable: 12/31/2008  
(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

Hema Rao, M.D.  
(voting group)

Signature: Hema Rao

(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)

Hema Rao, M.D.  
(Typed or printed name of person signing)

President  
(Title of person signing)

FILED  
09 APR 13 PM 4:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$35