

P02000011118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

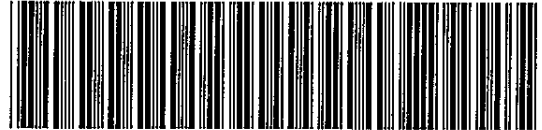
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status ☒

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Office Use Only



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12/15/05--01015--014 \*\*43.75

FILED

05 DEC 15 AM 11:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

12-31-05

Dissolution w/notice

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Managed Care Review Services, Inc.

**DOCUMENT NUMBER:** P02000011118

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

Please return all correspondence concerning this matter to the following:

Stephen A. Thompson

(Name of Contact Person)

Copeland Thompson Farris PC

(Firm/Company)

231 S. Bemiston, Suite 1220

(Address)

Clayton, MO 63105

(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen A. Thompson

(Name of Contact Person)

at ( 314 ) 722-2224

(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

## ARTICLES OF DISSOLUTION

EFFECTIVE DATE  
12-31-05

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:

Managed Care Review Services, Inc.

SECOND: The document number of the corporation (if known): P02000011118

THIRD: The date dissolution was authorized: October 1, 2005

Effective date of dissolution if applicable: December 31, 2005

(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 of 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

\_\_\_\_\_  
(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)

Carl C. Petty, Jr.

(Typed or printed name of person signing)

Chairman

(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: Managed Care Review Services, Inc.

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:

The name and address of Claimant; a brief description of the nature  
of the claim sufficient to enable the corporation to ascertain the  
alleged claim from its own books and records; the amount of the  
claim; the date the claim arose; any writing evidencing or relating  
to the claim; name and address of contact person on behalf of Claimant.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Managed Care Review Services, Inc.

c/o Stephen A. Thompson

Copeland Thompson Farris PC

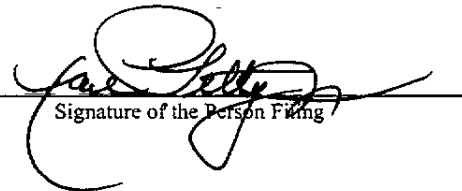
231 S. Bemiston, Suite 1220

Clayton, MO 63105

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.

Carl C. Petty, Chairman

Printed Name of the Person Filing

  
Signature of the Person Filing

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