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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Palmetto West Wedical Center, Inc
DOCUMENT NUMBER: PD2 0000 44776
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Elizabeth Jerez, Eg. (Name of Person)
Shuffs & Bowen, LLP. (Name of Firm/Company)
201 S. Biscargne Blud., Suite 1500 (Address)
Miani, (City/State/and Zip Code)
For further information concerning this matter, please call:
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee  □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee,  Certificate of Status
MAILING ADDRESS: STREET ADDRESS:

Amendment Section

409 E. Gaines Street

Division of Corporations

Tallahassee, Florida 32399

Amendment Section

P.O. Box 6327

Division of Corporations

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 composition of expressive filed with Department of States
FIRST:	The name of the corporation as currently filed with Department of State:
_	Palmetto West Medical Center Inc
SECOND:	The document number of the corporation (if known): $PO20009417$
THIRD:	The file date of the articles of incorporation was: $\frac{D4}{24}$ $\frac{2002}{2002}$
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 21st day of Deaember, 2004.
Signatur	e:  (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.)
	Alfredo C. Garcia (Typed or printed name of person signing)
	(Title of person signing)

Filing Fee: \$35