

**P02000067405**

**Florida Department of State  
Division of Corporations  
Public Access System**

**Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H07000235108 3)))



H070002351083ABC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)205-0380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000146  
Phone : (305)444-4994  
Fax Number : (305)444-4977

07 SEP 20 PM 1:35  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
2007 SEP 20 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DISSOLUTION OR WITHDRAWAL**

**GIJE DIAGNOSTIC CENTER INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

*Vol Diss inactive corp  
9-20-07 cy*

(((H07000235108)))

## 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:  
**GJE DIAGNOSTIC CENTER INC.**

SECOND: The document number of the corporation (if known): **P02000067405**

THIRD: The date dissolution was authorized: **09/20/2007**  
Effective date of dissolution if applicable: **09/20/2007**  
(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 and filed 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, assignee, or other court appointed fiduciary, by that fiduciary)

**VAZQUEZ, MARGARITA**

(Typed or printed name of person signing)

**PRESIDENT**

(Title of person signing)

FILED  
07 SEP 20 PM 1:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA