

PO20000076704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

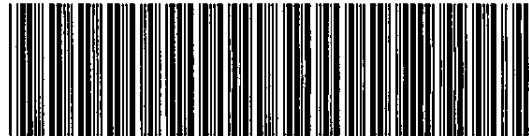
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/21/15--01058--008 **113.75

12-31-15

FILED
15 DEC 21 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 28 2015
RAMSEY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Corporate Dissolution

DOCUMENT NUMBER: P02000076704

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

Please return all correspondence concerning this matter to the following:

Nanjappa Chandramohan

(Name of Contact Person)

N. Chandramohan, M.D., P.A.

(Firm/Company)

6790 SE 12th Terrace

(Address)

Ocala, FL 34480

(City/State and Zip Code)

For further information concerning this matter, please call:

Nanjappa Chanramohan at **(352) 223-4866**

(Name of Contact Person)

(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

12-31-15

ARTICLES OF DISSOLUTION

FILED
15 DEC 21 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:
N. Chandramohan, M.D., P.A.

SECOND: The document number of the corporation (if known): P02000076704

THIRD: The date dissolution was authorized: 11/30/2015

Effective date of dissolution if applicable: 12/31/2015
(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

(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)

Nanjappa Chandramohan
(Typed or printed name of person signing)

President
(Title of person signing)

Filing Fee: \$35