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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION OF CORPORATION
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DANIEL NGUYEN DDS (Name of Person)
(* tallet = 2 = 1 tallet)
JAXDENTAL, PA
(Name of Firm/Company)
7855 ARGYLE FOREST BV, #104 (Address)
TACKSONVILLE, FL 32073 32244 (City/State/and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (904) 777-3308 (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: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

* Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles

or dissolutio	nt.
FIRST:	The name of the corporation as currently filed with the Department of State: Jax Dental, PA
SECOND:	The document number of the corporation (if known): P0200092988
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: /2/31/04 (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 HASSE 27
	Signed this 15 day of December, 2004 Roll 8
Signa	(By a director) physident 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) (Typed or printed name of person signing)
	Director, Vice President. (Title of person signing)

Filing Fee: \$35