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COVER LETTER

TO: Amendment Section **Division of Corporations** . SUBJECT: Articles of Disssolution DOCUMENT NUMBER: P02000102605 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Angela K. Demetriades (Name of Contact Person) (Firm/Company) 5373 2nd St (Address) St. Augustine, FL 32080 (City/State and Zip Code) For further information concerning this matter, please call: at (904) 460-2274
(Area Code & Daytime Telephone Number) Angela K. Demetriades (Name of Contact Person) 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 & Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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 corporation as currently filed with the Florida Department of State:	
	Angela K. Demetriades, PA	
SECOND:	The document number of the corporation (if known): P02000102605	
THIRD:	The file date of the articles of incorporation: 09/23/2002	
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.	
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.)		
	Angela K. Demetriades	
	(Typed or printed name of person signing)	
	President	
	(Title of Person Signing)	

Filing Fee: \$35