

P03000/40633

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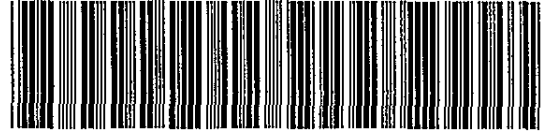
(Business Entity Name)

(Document Number)

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of vol.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF CORPORATION

DOCUMENT NUMBER: PO 3000140633

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

Please return all correspondence concerning this matter to the following:

ROBERT MURDOCH AP

(Name of Person)

MURDOCH FAMILY PHYSICIANS, P.A.

(Name of Firm/Company)

4632 VINCENNES BLVD #104

(Address)

CAPE CORAL FL 33904

(City/State/and Zip Code)

For further information concerning this matter, please call:

ROBERT MURDOCH AP

(Name of Person)

at (239) 540 1220

(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, 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 of dissolution:

FIRST: The name of the corporation as currently filed with the Department of State:

MURDOCH FAMILY PHYSICIANS, P.A.

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

P030001406

THIRD: The date dissolution was authorized:

1/11/2005

Effective date of dissolution if applicable:

1/31/2005

(no more than 90 days after dissolution effective 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

NONEEN MURDOCH AP + ROBERT MURDOCH AP
(voting group)

Signed this 11th day of JANUARY, 2005

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)

ROBERT MURDOCH

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA