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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Articles of Dissolutions

DOCUMENT NUMBER: P04000010294

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

Please return all correspondence concerning this matter to the following:

William T Woods

	(Name of Contact Person)		
William T. Woods PA		:	
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9320 Creole Court		Balabi Birth	
	(Address)	na the standard stands	
Weeki Wachee, FL 346	613		
<u></u>	(City/State and Zip Code)	· · · · ·	
For further information concernin	ng this matter, please call:	4	· · ·
William Woods	at (352	650-4998	
(Name of Contact Perso	on) (Are	a Code & DaytimeTele	phone Number)
Enclosed is a check for the follow	ving amount:		•
☑ \$35 Filing Fee □ \$43.75 F Certifica	Filing Fee & 🛄 \$43.75 Fi ate of Status Certified		.50 Filing Fee, tificate of Status &
· · · ·	(Addition enclosed)	al copy is Cer (Ac	tified Copy Iditional copy is Inclosed)
MAILING ADDRESS: Amendment Section Division of Corporations	(Addition	al copy is Cer (Ad er <u>STREET ADD</u> Amendment Sec	tified Copy Iditional copy is Inclosed) RESS: tion
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 18, 2010

WILLIAM T. WOODS 9320 CREOLE COURT WEEKI WACHEE, FL 34613

SUBJECT: WILLIAM T. WOODS, P.A. Ref. Number: P04000010294

We have received your document for WILLIAM T. WOODS, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 210A00015052

www.sunbiz.org

Division of Corporations, P.O. BOX 6327 Tallahassee, Florida 32314

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:
	William T. Woods, P.A.
SECOND:	The document number of the corporation (if known): P04000010294
THIRD:	The date dissolution was authorized: 04/16/2010
·	Effective date of dissolution if applicable: (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 clast for dissolution was sufficient for approval.
	\square Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitles 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)

William T. Woods

(Typed or printed name of person signing)

President

(Title of person signing)