## 04000050775

(Requestor's Name)
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(City/State/Zip/Phone #)
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(Business Entity Name)
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06/15/05--01037--014 \*\*43.75

diss. C. Coulliste JUN 1 6 2005

### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Ft. Myers	Health Care Center, Inc.	
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	and the second s	Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		_
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
-		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
	<u> </u>	UCC 11 Search
Name	Date Time	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 15, 2005

CAPITAL CONNECTION, INC.

TALLAHASSEE, FL

SUBJECT: FT. MYERS HEALTH CENTER, INC.

Ref. Number: P04000050775

We have received your document for FT. MYERS HEALTH CENTER, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

You need to complete the application, the second line has no date showing.

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) 245-6903.

Cheryl Coulliette Document Specialist

Letter Number: 505A00041530

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

# SIN IS PK II

#### ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FTRST:	The name of the corporation is: Ft. Myers Health Center, Inc
SECOND:	The date dissolution was authorized: 6-10-2005
THIRD:	Adoption of Dissolution (CHECK ONE)
	solution was approved by the shareholders. The number of votes cast for dissolution for approval.
Diss	solution was approved by vote of the shareholders through voting groups.
	he following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
	Roman Varserman.
	(voting group)
Sig	med this 10 day of Sune , 200
SignatureX	(By the Chairman of Vice Chairman of the Board, President, or other officer)
	Roman VasserMan (Typed or printed name)
	President.