P0400063897

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #f)
, , , , , , , , , , , , , , , , , ,
PICK-UP WAIT MAIL
_
(Business Entity Name)
(Cashoos Char) Name)
75 (Al)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,
,

Office Use Only



400035758304

05/25/04--01038--019 **35.00

04 MAY 25 M ID 19
DIVISION OF CONTION

diss.

C. Coulliste MAY 2 5 2004

» · · · · · · · · · · · · · · · · · · ·	4 <u>4</u>	· .
OFFICE USE ONLY(DOCUMENT#)		·
LAZARUS CORPORATE FIL	ING SERVICE	
3320 S.W. 87 AVENUE		
MIAMI, FLORIDA (305)552-5973		
		THE VALUE OF THE STATE OF THE S
		FFICE USE ONLY
CORPORATION NAME(S) &	DOCUMENT NUMBER(S) (if known):
MEDICAL AT	WICED NET	VORK SERVICES INC
(Corporation Name)	NILUI NOIN	ocument#)
2	<u> </u>	
(Corporation Name)	(0	ocument #1
(Corporation Name)	(D	ocument #)
4		<u> </u>
(Corporation Name)		ocument #)
Walk in Pick up time	2.80	Certified Copy
Пил. Пил.		
Mail out Will wait	Photocopy	Certificate of Status
	<u> </u>	
NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Of	ficer/Director
. Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
OTHER FILINGS	REGISTRATION/	
Annual Report	QUALIFICATION	
Fictitious Name	Foreign	
Name Reservation	Limited Partnership	
, tarre resultation	Reinstatement	
	Trademark	
	Other	

CR2E031(9/92)

Examiner's Initials

ARTICLES OF DISSOLUTION

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: Medical ADVICEN			
NETWORK SERVICES INC			
SECOND: The filing date of the articles of incorporation was: 4/16/04			
THIRD: (CHECK ONE)			
None of the corporation's shares have been issued.			
The corporation has not commenced business.			
FOURTH: No debt of the corporation remains unpaid.			
FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.			
SIXTH: Adoption of Dissolution (CHECK ONE)			
☐ A majority of the incorporators authorized the dissolution.			
A majority of the directors authorized the dissolution.			
Signed this 2 4 day of May, 2004			
Signature Junto advant			
(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)			
OTILIA · AGUDELO (Typed or printed name)			
(Typed or printed name)			
Prisident			

(Title)