P04000092459

(Re	equestor's Name)	
(Ac	ddress)	
		•
(Ac	ddress)	
Ų. .		
0		
(Ci	ty/State/Zip/Phone	#)
☐ PICK-UP	☐ WAIT	MAIL
	☐ ₩	LI WALL
/Di	usiness Entity Name	<u></u>
(DC	isiness Enuty Nami	e)
(Document Number)		
·	·	
Certified Copies	_ Certificates	of Status
<u> </u>		
Special Instructions to	Filing Officer:	
		i
		l
		1
		ł

Office Use Only



100117622331

03/20/08--01001--031 **35.00

FILED

RIAN 19 PM 3-35

FILED

FILED

FILED

FILED

FILED

D:55/ notice 3/21. P



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 10, 2008

Teresa Scher Teresa McAurthur Scher LCSW, PA 5004 East Fowler Avenue C-145 Tampa, FL 33617

SUBJECT: TERESA MCARTHUR SCHER, LCSW, P.A.

Ref. Number: P04000092459

We have received your document for TERESA MCARTHUR SCHER, LCSW, P.A., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne Senior Section Administrator

Letter Number: 008A00014652

FACT AND ANY LETS, CLESSISTANCE OF SHORT AND SECURIOR OF SHALL AND

30:8 MA 61 9AM 800S

RECEIVE

COVER LETTER

TO: Amendment Section Division of Corporations		
subject: Notice of Corporate Oissolution		
DOCUMENT NUMBER: PØ4ØØØ92459		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Teresa Scher (Name of Contact Person)		
(Name of Contact Person)		
Teresa McAurthur Scher LCSW, PA (Firm/Company)		
5004 East Fowler Avenue (-145 (Address)		
Suffampa, FLorida 33617 (City/State and Zip Code)		
For further information concerning this matter, please call:		
at (813) 767-1991 (Name of Contact Person) (Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\bigsquare\text{\$43.75 Filing Fee & \$\bigsquare\text{\$43.75 Filing Fee & \$\text{\$52.50 Filing Fee, } \\ Certificate of Status & \$\text{Certified Copy (Additional copy is enclosed)} \\ \end{array}\$ (Additional copy is enclosed)		
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section		
Division of Corporations P.O. Box 6327 Amendment Section Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 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: Teresa Mc Aurthur Scher LCSW PA. The document number of the corporation (if known): POHOOO92459 SECOND: The date dissolution was authorized: 12|31|2007 THIRD: Effective date of dissolution if applicable: \2 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 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 (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) Sident Owner

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.
This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation: Teresa Mc Aurthur Scher, LCSW, PA
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
No claims known
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Teresa McAurthur Scher LCSW, PA
5004 East Fowler Avenue # C-145
TAMPA, FLORIDA 33617
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00