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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : BAKER & HOSTETLER LLP
Account Number : I19990000077
Phone : (407) 649-4043
Fax Number : (407) 841-0168

**DISSOLUTION OR WITHDRAWAL
THOMAS A. LACY, M.D., P.A.**

Certificate of Status	0
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MAY 19 2015
T. LEMIEUX

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:

THOMAS A. LACY, M.D., P.A.

SECOND: The document number of the corporation (if known): P04000122717

THIRD: The date dissolution was authorized: May 15, 2014

Effective date of dissolution if applicable: May 30, 2014
(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 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

N/A
(voting group)

Signed this 15th day of May, 2014.

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)

Thomas A. Lacy, M.D.
(Typed or printed name of person signing)

President
(Title of person signing)

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