## P04000157165

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Connected Instructions As	Filing Officer			
Special Instructions to Filing Officer:				





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SECRETARY OF STATE

APPROVED

C. Coultierte AUG 0 3 2007



**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Charles Kingle P. A.	
DOCUMENT NUMBER: POYDOO 19 165	
The enclosed Articles of Revocation of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
(Name of Contact Person)	-
Charles Kircht P.A. (Firm/Company)	-
253 Hermosita Dale (Address)	-
ST Reterrate FC 3378 (City/State and Zip Code)	o6 -
For further information concerning this matter, please call:	
(Name of Contact Person) at (27) 363 135 (Area Code & Daytime Telephone Number)	_
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\begin{array}{ c c c c c c c c c c c c c c c c c c c	
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 14, 2007

CHARLES KNIGHT P.A. 253 HERMOSITA DR ST. PETE BEACH, FL 33706

SUBJECT: CHARLES KNIGHT P.A.

Ref. Number: P04000157165

We have received your document for CHARLES KNIGHT P.A. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Revocation of Dissolution cannot be filed for an active Florida corporation. If you are trying to voluntarily dissolve the corporation enclosed is information on filing Articles of Dissolution.

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: 407A00033286

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## **COVER LETTER**

Division of Corporations				
SUBJECT: Resocration q Dissolstion				
DOCUMENT NUMBER: PO 4000 15) 165				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
(Name of Contact Person)  (Name of Contact Person)  (Firm/Company)				
(Address)  (City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (22) 363 13 (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)				
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle				

Tallahassee, FL 32301

## 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:
	Charles Knight P.A.	
SECOND:	The document number of the corporation (if known): P64000	157165
THIRD:	The date dissolution was authorized: $4-30-07$	<del></del>
	Effective date of dissolution if applicable: 4-30-0 (no more than 90 days after dissolution for the solution	file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast f was sufficient for approval.	or dissolution
	Dissolution was approved by the shareholders through voting groups.	
	The following statement must be separately provided for each voting group er to vote separately on the plan to dissolve:	ntitled
	The number of votes cast for dissolution was sufficient for approval by	07 SE
	Chab 2 Par S	AUG -
	(voting group)	AND FILED -3 PM -3 PM ASSEE, F
		ြို့တူ ယူ
	Signature: Add w Bank	38 ATE )RIOA
	(By a director, president or other officer - if director or officer have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed of printed name of person signing)	
	(Title of person signing)	
		. /

Filing Fee: \$35 - Already Paido