## P05000083593

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## **COVER LETTER**

Division of Corporations	
SUBJECT: Shakman Buildin	ig, Inc
DOCUMENT NUMBER: PO 50000 83	3593
The enclosed Articles of Dissolution and fee are submitted for	r filing.
Please return all correspondence concerning this matter to the	following:
Don Zullo (Name of Contact Person)	
Shakman 7tospital (Firm/Company)	lity, LLC
2595 NW Boca Ratm	Blvd. Ste. 100
(Address)	
Boca Raton, FL 334	31
(City/State and Zip Code)	
For further information concerning this matter, please call:	
	750-828 ode & Daytime Telephone Number)
, , , , , , , , , , , , , , , , , , ,	ode & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$\textstyle \textstyle	cee & \$\sum_{\text{\$\frac{5}{2}}.50}\$ Filing Fee,  Certificate of Status & Certified Copy  (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 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:		
	Shakman Building Inc.		
SECOND:	The document number of the corporation (if known): $\frac{50500083593}{1000000000000000000000000000000000000$		
THIRD:	The date dissolution was authorized: $\frac{4-29-09}{}$		
	Effective date of dissolution if applicable:  (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		
	09 H		
	Signature:  (voting group)  HIT  SSE 4  PA  CORPA  CORPA		
	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)		
	Director (Title of person signing)		

Filing Fee: \$35