

P05000107159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies ☒

Certificates of Status ☒

Special Instructions to Filing Officer:

Office Use Only



200074174782

05/09/06--01012--012 \*\*43.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2006 MAY -9 AM 8:19

Uoblio W/notice

yf  
5/16

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Antonio Rodriguez, P.A. "Dissolution"

DOCUMENT NUMBER: PO5000107159

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Antonio Rodriguez  
(Name of Contact Person)

Antonio Rodriguez PA  
(Firm/Company)

316 Heather Hill Blvd  
(Address)

Davenport, FL 33837  
(City/State and Zip Code)

For further information concerning this matter, please call:

Antonio Rodriguez at (863) 557-2540  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☒ \$43.75 Filing Fee & Certified Copy ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy  
no (Additional copy is enclosed) (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:

Antonio Rodriguez, PA

SECOND: The document number of the corporation (if known): PO5000107159

THIRD: The date dissolution was authorized: 5-5-2006

Effective date of dissolution if applicable: 5-5-2006  
(no more than 90 days after dissolution file date)

FILED  
SECRETARY OF CORPORATIONS  
2006 MAY -9 AM 8:19

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)

Antonio Rodriguez  
(Typed or printed name of person signing)

President  
(Title of person signing)

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: Antonio Rodriguez, PA.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Claimer name, Reason of claim, Amount of claim  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

316 Heather Hill Blvd  
Davenport, FL 33837  
\_\_\_\_\_  
\_\_\_\_\_

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.

Antonio Rodriguez  
Printed Name of the Person Filing

  
Signature of the Person Filing