## P05000165866

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AUG 27 2009

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Voluntary Dissolution of	a Florida Pr	Profit Corporation
DOCUMENT NUMBER: P050001658	66	
The enclosed Articles of Dissolution and fee a	are submitted fo	for filing.
Please return all correspondence concerning th	is matter to the	e following:
JoAnne	Ryan	
(Name of Con	ntact Person)	
(Firm/C	ompany)	
338 Bird k	Key Drive	
(Addr	ess)	·
Sarasota, FI	orida 34236	6
(City/State a	nd Zip Code)	
For further information concerning this matter	, please call:	
· · · · · · · · · · · · · · · · · · ·		
(Name of Contact Person)	(Area C	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:		
(.		Certificate of Status &
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:
	Epic Management Group, Inc.
SECOND:	The document number of the corporation (if known): P05000165866
THIRD:	The date dissolution was authorized: August 20, 2009
	Effective date of dissolution if applicable: August 20, 2009  (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
	Signature:  (voting group)  ARETARY OF STATE  OR 10: 40  Signature:  (Ry a distingtor president or other officers have not been selected by the state of the stat
	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)
	JoAnne Ryan
	(Typed or printed name of person signing)
	President/Owner
	(Title of person signing)

Filing Fee: \$35