

P06000005800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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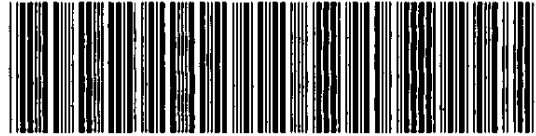
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/08/10--01002--001 **10.00

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2010 JAN 26 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2010 FEB -4 P 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2-8-10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Critical Care Computer Services

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Kevin Brown
(Name of Contact Person)

(Firm/Company)

2366 N.E. 29th Street
(Address)

Lighthouse Point, FL 33064
(City/State and Zip Code)

For further information concerning this matter, please call:

Kevin Brown at (954) 246-3613
(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 (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

+ 10% check
+ 25% credit
from previous check

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2010

KEVIN BROWN
2366 NE 29TH STREET
LIGHTHOUSE POINT, FL 33064

SUBJECT: CRITICAL CARE COMPUTER SERVICES, INC.
Ref. Number: P06000005800

We have received your document for CRITICAL CARE COMPUTER SERVICES, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 410A00002185

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FEB -4 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Critical Care Computer Services, Inc.

SECOND: The document number of the corporation (if known): 906000005800

THIRD: The date dissolution was authorized: 12/29/09

Effective date of dissolution if applicable: 12/31/09
(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

(voting group)

Signature: _____

(By a director, president or other officer - if directors or officers have not been selected, an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, that fiduciary)

Kevin Brown

(Typed or printed name of person signing)

President

(Title of person signing)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 FEB -4 P 4: 06

FILED

Filing Fee: \$35