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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of T+G M	lectica L. Associates
DOCUMENT NUMBER: PØ60000 16872	,
The enclosed Articles of Dissolution and fee are submitted	d for filing.
Please return all correspondence concerning this matter to	the following:
GARY ROSADO (Name of Contact Person)	
(Name of Contact Person))
(Firm/Company)	
306 Beverly Court	
306 Beverly Court (Address)	
Sanford, FL 32773 (City/State and Zip Code	
(City/State and Zip Code	e)
For further information concerning this matter, please call:	
AILEEN VALENTIN at (407 (Name of Contact Person) (Are	314-9718 a Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	a court et suj illio i ciepnolis i tallicoli,
\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & Certified Coperation (Additional cenclosed)	py 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 607.1401, 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:
	T & G Medical Associates, Inc.
SECOND:	The document number of the corporation (if known): PO6000016872
THIRD:	The file date of the articles of incorporation:
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	X A majority of the directors authorized the dissolution.
Sign	ature: (By a director, president of 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.) TAINA REVES (Typed or printed name of person signing) President (Title of Person Signing)
	(Title Of Felson Agains)

Filing Fee: \$35