## PU600033400

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations				
SUBJECT: Independence Therapy, P.A.				
DOCUMENT NUMBER: P06000033400				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Wendy Civitella				
(Name of Contact Person)				
Independence Therapy, P.A.				
(Firm/Company)				
17254 Spearmint Lane				
(Address)				
Punta Gorda, FL 33955				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Wendy Civitella at ( 941 (Area Co	575-0220 ode & Daytime Telephone Number)			
	ode & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
▼\$35 Filing Fee  \$43.75 Filing Fee & \$43.75 Filing Fee  Certificate of Status  Certified Copy (Additional copy enclosed)	ee & \$\int \\$52.50 \text{ Filing Fee,} \\ Certificate of Status & \\ is \text{ 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 607.1401, 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:		
	Independence Therapy, P.A.			
SECOND:	The document number of the corporation (if known): P0600003340	<u>)0</u>		
THIRD:	The file date of the articles of incorporation: 03/07/06			
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 dist to the shareholders, if shares were issued.	ributed		
SEVENTH:	Adoption of Dissolution (CHECK ONE)	Z S	0	
	A majority of the incorporators authorized the dissolution.	EQUE.	6 №	
	A majority of the directors authorized the dissolution.	ARY OF	1 11 A	רבנ
Sign	nature: Windy antilla	STATE	14 PH 12: 42	
~- <b></b>	(By a director, president or other officer - if directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	incorporator	- if	
	Wendy Civitella			
	(Typed or printed name of person signing)			
	President			
	(Title of Person Signing)			

Filing Fee: \$35