

P06000050826

(Requestor's Name)

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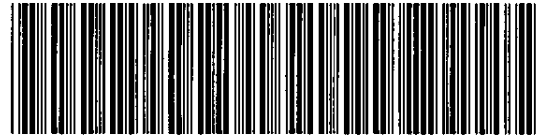
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/09/07--01034--006 **35.00

RECEIVED

07 MAY -9 AM 10:40

OFFICE OF THE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

2007 MAY -9 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AJR
5/9/07

**LAZARUS
CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. HELTON MEDICAL EQUIPMENT
(Corporation Name) (Document #)

2. Corp.
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time

2:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☒ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED
2007 MAY -9 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is: HELTON MEDICAL EQUIPMENT Corp.

SECOND: The date dissolution was authorized: APRIL-26-2007

THIRD: 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 vote of 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)

Signed this 26 day of APRIL, 2007.

Signature

[Signature]
(By the Chairman or Vice Chairman of the Board, President, or other officer)

HELEN RODRIGUEZ
(Typed or printed name)

PRESIDENT
(Title)