## P06000072305

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FALLAHASSEE FLORINA



## **COVER LETTER**

TO: Amendment Section

Division of Corporations
SUBJECT: Administratively Dissovle . BATON ROUGE LAND ACQUISITO
DOCUMENT NUMBER: P06000072305
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Theresa Laurenzano
(Name of Contact Person)
Promise Healthcare Inc.
(Firm/Company)
999 Yamato Road, Suite 300
(Address)
Boca Raton, FL 33431
(City/State and Zip Code)
For further information concerning this matter, please call:
Thresea Laurenzano at (561) 869-3100
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
▼\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee,  Certificate of Status Certified Copy Certificate of Status &  (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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 Departmen	
	BATON ROUGE LAND ACQUISITION II	ANC.
SECOND:	The document number of the corporation (if known): P06 D00057	2305
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 dist to the shareholders, if shares were issued.	ributed
SEVENTH:	Adoption of Dissolution (CHECK ONE)	O; SE TALL
	A majority of the incorporators authorized the dissolution.	9 APR CRETE AHA
	A majority of the directors authorized the dissolution.	22 NRY O SSEE
Sian	eature: Havan Ville	ED PH 1: 20 FSTATE FLORIDA
Olgi.	(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
	Howard Koslow (Typed or printed name of person signing)	
	President (Title of Person Signing)	

Filing Fee: \$35