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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: FLORIDIAN MEDICA	L CENTER CO	ORP.
SOBOBET:		
DOCUMENT NUMBER: P0600011	14397	
The enclosed Articles of Dissolution and	fee are submitted fo	or filing.
Please return all correspondence concerning	ng this matter to the	following:
RALPH PADRON		
(Name of	f Contact Person)	
PADRON & ASSOCIATES, INC.		
	rm/Company)	· · · · · · · · · · · · · · · · · · ·
2095 W 76TH ST		The transfer of the transfer o
()	Address)	
HIALEAH, FL 33016	٠,	Michaels)
	tate and Zip Code)	
For further information concerning this m	atter, please call:	
RALPH PADRON	at (305	818-0404
(Name of Contact Person)	(Area C	Code & Daytime Telephone Number)
Enclosed is a check for the following amo	ount:	
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy enclosed)	Certificate of Status & y is Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	The Mark State (C. S. State procedure state of Marks)	STREET ADDRESS:
Amendment Section Division of Corporations		Amendment Section Division of Corporations
P.O. Box 6327		Clifton Building
Tallahassee, FL 32314		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:		
	FLORIDIAN MEDICAL CENTER CORP.		
SECOND:	The document number of the corporation (if known): P06000114397		
THIRD:	The file date of the articles of incorporation: 09/01/2006		
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.		
	A majority of the directors authorized the dissolution.		
Sign	ature:		
	(By a director, president or 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.)		
	WILLIAM E. SANCHEZ		
(Typed or printed name of person signing)			
PRESIDENT			
	(Title of Person Signing)		

Filing Fee: \$35