P07000037408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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11/23/15--01006--001 **35.00

15 NOV 23 PM 1:46

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 24 2015

C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of corporation

DOCUMENT NUMBER: P07000037408

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Magda E. Sanchez -Velez, MD
(Name of Contact Person)

(Firm/Company)

119 Celebration Blvd
(Address)

Celebration FL, 34747
(City/State and Zip Code)

For further information concerning this matter, please call:

Magda E. Sanchez-Velez, MD at (407) 913-6602
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ■ $35 Filing Fee
- ☐ $43.75 Filing Fee & Certificate of Status
- ☐ $43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- ☐ $52.50 Filing Fee, Certificate of Status & 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 NOV 23 PM 1:46

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:

Magda E. Sanchez-Velez MD PA

SECOND: The document number of the corporation (if known): P07000037408

THIRD: The file date of the articles of incorporation: 03/23/2007

FOURTH: (CHECK AT LEAST ONE BOX)

- [x] 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)

- [x] A majority of the incorporators authorized the dissolution.
- [ ] A majority of the directors authorized the dissolution.

Signature: Magda E. Sanchez-Velez

(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.)

Magda E. Sanchez-Velez, MD

(Typed or printed name of person signing)

President

(Title of Person Signing)

Filing Fee: $35

Notice of Corporate Dissolution

15 NOV 23 PM 1:46

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "***Notice of Corporate Dissolution***" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Magda E. Sanchez-Velez, MD PA

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the ***Articles of Dissolution***.

Description of information that must be included in a claim:

There is no existing claims for this corporation. In the case of any claims please mail to the following address:

119 Celebration Blvd Celebration, FL 34747

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

119 Celebration Blvd Celebration, FL 34747

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Magda E. Sanchez-Velez, MD

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately $35.00