

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		





900305085289

11/01/17--01001--023 **43.75



1:0V 0 2 2017 F. LIEBALEUX



COVER LETTER

TO: Amendment Section		
Division of Corporations		
SUBJECT: DISSOLUTION	OF PROFIT	[GIZFORATION
DOCUMENT NUMBER: P07	00004319	6
The enclosed Articles of Dissolution and	fee are submitted for file	ing.
Please return all correspondence concerni		
JOHN L. WHEEL	ER	
(Name of Contact Person)		
PRIMACARE HE	ALTH CENTE	PS, INC
$t_{\rm LH}$	in Company)	•
3236 DR. MUK	, VZ ST,	N
	radicss)	
ST. PETERSBURG (City/St.	<u>. Fl</u> 337	04
(City/St	ate and Zip Code)	
For further information concerning this ma	utter, please call:	
Name of Contact Person)	at (<u>727) 8</u> (Area Code)	123-4848 (Daytime Teiephone Number)
Enclosed is a check for the following amou		,,
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section	STREET ADDRESS:	
Th. 1.1	Ame	ndment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:

	PRIMACITE HEALTH CONTERS INC.	
SECOND:	The document number of the corporation (if known): P0700043196	
THIRD:	The date dissolution was authorized: SEPTEMBER 15 2017	
	Effective date of dissolution if applicable: SEPTEMBER 15, 2017	
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.	
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes east for dissolution was sufficient for approval.	
	☐ Dissolution was approved by 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	
	100% VOTES BY SHARE HOLDERS	
	(voting group)	
S	ignature:	
3	(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)	
_	VOHN L. WHEELER	
	(Typed or printed name of person signing)	
_	CEO/CHAMPINAN	
(Titlé of person signing)		