P07000135216

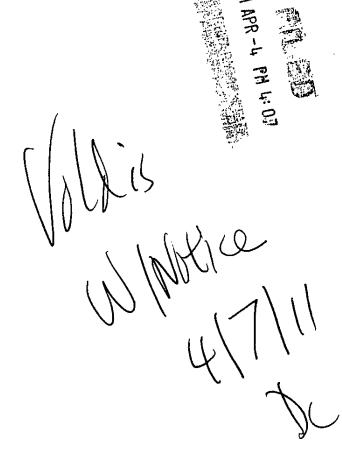
Dr. David Eisner 2424 South Dixie Highway West Palm Beach, FLA 33401							
					(Addres	ss)	
					(City/St	ate/Zip/Phone	#)
PICK-UP	WAIT	MAIL					
(Busine	ess Entity Nam	ee)					
(Docum	nent Number)						
Certified Copies	Certificates	of Status					
Special Instructions to Filin	ng Officer:						

Office Use Only



200199790932

04/04/11--01025--024 **35.00



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:		
	DAVID EISNER DDS, P.A.		
SECOND:	The document number of the corporation (if known): P07000135216		
THIRD:	The date dissolution was authorized: March 14, 2010		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)		
FOURTH:	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 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		
	David A Eisner		
	(voting group)		
•			
	Signature: (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)		
	David A Eisner		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

Filing Fee: \$35

Notice of Corporate Dissolution

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	DAVID EISNER DDS,	P.A	
Date of dissolution v specified in the Artic	vill be the date the dissolution is filed less of Dissolution.	I with the Department of State or as	
Description of inform	nation that must be included in a clai	m:	
			_
			_
			_
Mailing address whe	re claims can be sent: (Claims canno	t be sent to the Division of Corporations)	
Da	vid A Eisner, DDS, PA	<u>.</u>	
24.	24 S. Dixie Hwy		
We	est Palm Beach, Fl 3340	1	
	bove named corporation will be barn he filing of this notice.	red unless a proceeding to enforce the claim is commen	ced
David A Eisne	er		
Pri	nted Name of the Person Filing	Signature of the Person Filing	

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