(Requestor's Name)  Emmanuel Lonsdorfer 3177 County Road K N. Custer, WI 54423-9658
(Address)
(City/State/Zip/Phone #)
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## 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: $PR'VATE M.D. INC.$	
SECOND:	The document number of the corporation (if known): Pf 00000 2233	•
THIRD:	The date dissolution was authorized: 6/1/09	
	Effective date of dissolution if applicable: 9/1/09 (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.	n
	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	
	(voting group)	n-k
	(voting group)  SECRETARY ALLAHASSE	MAZIN MAZIN
	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)	garant and
	EMMANUEL LONSDONFER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

Filing Fee: \$35