

PD8000035431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

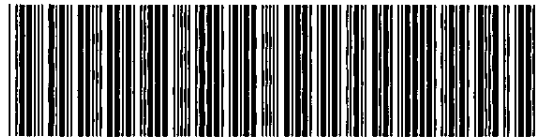
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 DEC -3 AM 9:04

Art Diss
10 12/4/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RIO DENTAL, INC.

DOCUMENT NUMBER: P08000035431

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

Please return all correspondence concerning this matter to the following:

LORI ZITO

(Name of Contact Person)

RIO DENTAL, INC.

(Firm/Company)

4202 ANACONDA DRIVE

(Address)

NEW PORT RICHEY, FL 34655

(City/State and Zip Code)

For further information concerning this matter, please call:

LORI ZITO

(Name of Contact Person)

at (727) 709-2396

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 18, 2008

LORI ZITO
RIO DENTAL INC
4202 ANACONDA DRIVE
NEW PORT RICHEY, FL 34655

SUBJECT: RIO DENTAL INC
Ref. Number: P08000035431

We have received your document for RIO DENTAL INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 608A00057605

RECEIVED
2008 DEC -3 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

RIO DENTAL, INC.

SECOND: The document number of the corporation (if known): P08000035431

THIRD: The date dissolution was authorized: NOVEMBER 1, 2008

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

(voting group)

Signature: Lori Zito

(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)

LORI ZITO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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