

P10000028791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

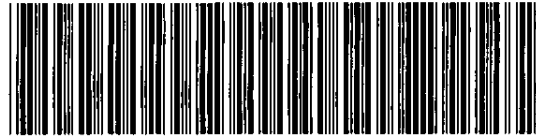
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 JUN 27 PM 4:46

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16 JUN 27 PM 4:01
S. SUPERIOR COURT OF FILING

JUN 28 2016

C McNAIR

W2/KIX

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

16 JUN 27 PM 4:16
STATE
CORPORATION

ACCOUNT NO. : I20000000195
REFERENCE : 193903 4353914
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 35.00

ORDER DATE : June 27, 2016
ORDER TIME : 3:40 PM
ORDER NO. : 193903-025
CUSTOMER NO: 4353914

DOMESTIC FILINGS

NAME: TAMPA BAY RADIOLOGY
CONSULTANTS, P.A.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER'S INITIALS: _____

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:
Tampa Bay Radiology Consultants, P.A.

SECOND: The document number of the corporation (if known): P10000028791

THIRD: The date dissolution was authorized: June 27, 2016

Effective date of dissolution if applicable: June 30, 2016
(no more than 90 days after dissolution file date)

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)

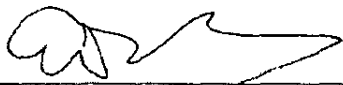
☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ 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: 

(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)

Ellis B. Norsoph, M.D.

(Typed or printed name of person signing)

President

(Title of person signing)