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SECRETARY OF STAIL STORE OF CORPORATIONS

AND 155 10 155

COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: National Association for Medical and Dental, Inc. DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Edward Stahlin** (Name of Contact Person) Direct Incorporation (Firm/Company) 123 N Ashley Street Suite 123 (Address) Ann Arbor, MI 48104 (City/State and Zip Code) For further information concerning this matter, please call: at (877 Edward Stahlin (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: □\$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:
	National Association for Medical and Dental, Inc.
SECOND:	The document number of the corporation (if known): P10000043299
THIRD:	The file date of the articles of incorporation:
FOURTH:	(CHECK AT LEAST ONE BOX)
	(CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: (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.)
	Tommie Lane (Typed or printed name of person signing)
	President (Title of Person Signing)

Filing Fee: \$35