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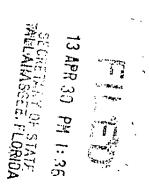
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates of	Status
		
Special Instructions to I	Filing Officer:	
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: RAMIRO A. LANZAS, M.D., P.A.	
DOCUMENT NUMBER: P10000104202	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
RAMIRO A. LANZAS, M.D. (Name of Contact Person)	
(Name of Contact Person)	
(Firm/Company)	
1165 CARDINAL CREEK PLACE (Address)	
OVIEDO, FL 32765 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
-	
(Name of Contact Person) (Name of Contact Person) (Area Code & Daytime Telephone Number)	
(Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\times \$\text{\$43.75 Filing Fee & Certificate of Status}\$ Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)	
/ MAILING ADDRESS: STREET ADDRESS: Annual and Social	
Amendment Section Amendment Section Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circ	

Tallahassee, FL 32301

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: RAMIRO A. LANZAS, M. D., P.A.			
SECOND:	The document number of the corporation (if known): P1000010420Z			
THIRD:	The date dissolution was authorized: 03/31/13			
	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			
	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) RAMIRO A. LANZAS M. D. (Typed or printed name of person signing)			
	PRESIDENT (Title of person signing)			

Filing Fee: \$35