0009605

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



400320516624

NOV 1 6 2018

S. YOUNG

11/13/18--01007--010 **35.06

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

SUBJECT: Articles of Dissolution						
DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following:						
					Swati Patel	
					(Name of	Contact Person)
Chirag Patel, MD PA						
(Firm/Company)						
7862 W Irlo Bronson Memorial Hwy #425						
(A	ddress)					
Kissimmee, FL 34747						
(City/State and Zip Code)						
For further information concerning this ma	tter, please call:					
Swati Patel	at (832) 368-1030					
(Name of Contact Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amou	int:					
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$62.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)					
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section					

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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 Chirag Patel, MD PA	State:					
SECOND:	SECOND: The document number of the corporation (if known):						
THIRD:	THIRD: The file date of the articles of incorporation: November 4, 2011						
FOURTH:	(CHECK AT LEAST ONE BOX)	STOR	18 N				
	None of the corporation's shares have been issued.	TANE !	NOV 13	!			
	☐ The corporation has not commenced business.	<u> </u>	#	(
FIFTH:	No debt of the corporation remains unpaid.	RDA DA	9: 05				
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	nature: Swith fall						
	(By a director, president or other officer - if directors or officers have not been selected, by an incorpin the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	porator	- if				
Swati Patel							
(Typed or printed name of person signing)							
	President						
	(Title of Person Signing)						

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Chirag Patel, MD PA	
Date of dissolution will be the date the dissolution is filed wi specified in the <i>Articles of Dissolution</i> .	th the Department of State or as
Description of information that must be included in a claim:	
The claim must include name of creditor, address, amount, basis o	f claim, security, and whether the claim is
contingent, unliquidated, matured or unmatured.	
.	
Mailing address where claims can be sent: (Claims cannot be	sent to the Division of Corporations)
7862 W Irlo Bronson Memorial Hwy #425	
Kissimmee, FL 34747	
A claim against the above named corporation will be barred within 4 years after the filing of this notice.	unless a proceeding to enforce the claim is commenced
Swati Patel	Sweet tate
Printed Name of the Person Filing	Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00