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TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ă.,

SUBJECT: Geetika Arora, M.D., P.A.	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: P12000088319	
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
MAX A. ADAMS ESQ	
(Name of	Contact Person)
LAW OFFICES OF MAX A. ADAMS, ESQ. PLL	C.
(Fir	m/Company)
325 ALMERIA AVENUE	
(A	Address)
CORAL GABLES FL 33134	
(City/Sta	ate and Zip Code)
For further information concerning this ma	atter, please call:
KRYSTAL ORTIZ RIVERA	at (
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	unt:
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section

Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301



June 8, 2015

MAX A. ADAMSM ESQ. LAW OFFICES OF MAX A. ADAMS, ESQ., PLLC 325 ALMERIA AVENUE CORAL GABLES, FL 33134

SUBJECT: GEETIKA ARORA MD PA

Ref. Number: P12000088319

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

You failed to make the correction(s) requested in our previous letter.

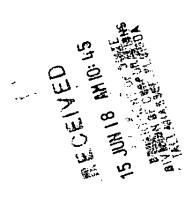
PLEASE CHOOSE 1(ONE) FORM AND COMPLETE IT IN ITS ENTIRETY.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 815A00011899





May 21, 2015

MAX A. ADAMS, ESQ. LAW OFFICES OF MAX A. ADAMS, ESQ. PLLC 325 ALMERIA AVENUE CORAL GABLES, FL 33134

SUBJECT: GEETIKA ARORA MD PA

Ref. Number: P12000088319

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

Please choose one form and complete it in its entirety.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 515A00010811

Division of Communitions D.O. DOV 0997 Mellaharana Filmida 9991

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: Geetika Arora, M.D.,P.A.	
SECOND:	The document number of the corporation (if known): P12000088319	
THIRD:	The file date of the articles of incorporation: October 26, 2012	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	☐ The corporation has not commenced business.	
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. Adoption of Dissolution (CHECK ONE)	
SEVENTH	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	大学の
Sign	nature: Max Walans	
	(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.)	
	Max A. Adams, Esq.	
	(Typed or printed name of person signing)	
	Attorney in fact	
	(Title of Person Signing)	

Filing Fee: \$35