Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A. Account Number : C76077001702

Account Number : C76077001702

Phone : (4C7)841-1200

Fax Number : (407) 423-1831

DISSOLUTION OR WITHDRAWAL CENTRAL FLORIDA DENTAL, P.A.

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AUG 0 1 2014

C. CARROTHELL

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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	: :		
	Central Florida Dental, P.A.				
SECOND:	The document number of the corporation (if known): P13000019777				
THIRD:	The date dissolution was authorized: July 22, 2014			-	
	Effective date of dissolution if applicable:	on file dati	<u> </u>	-	
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes can was sufficient for approval.	st for dis	ssolutio	on	
	Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled	i		
	The number of votes cast for dissolution was sufficient for approval by				
	(voting group)				
			, 1 4		
	Signature:	1][147	
	(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)		14 JUL 31 8/10:05	į.	
	Thomas Currie, D.M.D.	S		Ę.,	
	(Typed or printed name of person signing)	dy-	05		
	President				
	(Title of person signing)				
	Filing Fee: \$35				

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