P13000047160

(Re	equestor's Name)	,	
(Ad	ldress)		
(Ad	ldress)		
(Cir	ty/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Name	e)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



000253141960

10/31/13--01031--017 **43.75

SECRETARY OF STATE
TALL ASSESSEE: CORDA

NOV - 5 2013 T. CARTER TO: Amendment Section

COVER LETTER

Division of Corporations				
SUBJECT: Voluntary Dissolu	ution			
DOCUMENT NUMBER: P13000	047160			
The enclosed Articles of Dissolution and fo	ee are submitted for filing.			
Please return all correspondence concerning	g this matter to the following:			
Juan Perez				
(Name of	Contact Person)			
Altec Medical Supply In	C			
(Firm/Company)				
303 East Woolbright Ro				
Boynton Beach, FL 334	ddress) -35			
	te and Zip Code)			
For further information concerning this ma	tter, please call:			
Juan Perez	_{at (} 954) 496-3107			
(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) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)			
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassec, 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 S Altec Medical Supply Inc	State:			
SECOND:	The document number of the corporation (if known): P13000047160				
THIRD:	The date dissolution was authorized: 10-24-13				
	Effective date of dissolution if applicable: 10-24-13 (no more than 90 days after dissolution file	e date)	<u> </u>		
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval.	r dissolu	tion		
	☐ Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group ent to vote separately on the plan to dissolve:	itled			
	The number of votes cast for dissolution was sufficient for approval by	13 0	SECI TALL		
	100% of the only voting group	CT 3			
	(voting group)	- 			
	The state of the s	13 OCT 31 FM 12: 47	STATE		
	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)				
	Juan Perez				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				

Filling Fee: \$35