

P13000059681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

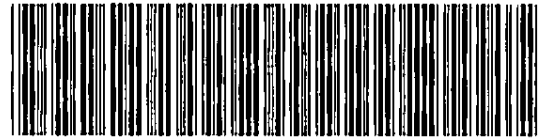
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Corrected Doc.  
per  
Paul Eckstein  
on 01/10/20  
DE

Office Use Only



700338138777

12/26/19--01015--008 \*\*43.75

Effect:  
12-31-19

W/Notice

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2019 DEC 26 PM 12:53

JAN 10 2020

RECORDED

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution : Premiere Research Sciences Inc  
\_\_\_\_\_

**DOCUMENT NUMBER:** P13000059681  
\_\_\_\_\_

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul Eckstein  
\_\_\_\_\_

(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

6019 Seminole Blvd  
\_\_\_\_\_

(Address)

Seminole, FL 33772  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

Paul Eckstein  
\_\_\_\_\_

(Name of Contact Person)

at ( <sup>727</sup> ) 771-3317  
\_\_\_\_\_

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |
|--|--|--|---|

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

## 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:

Premiere Research Sciences Inc

SECOND: The document number of the corporation (if known): P13000059681

THIRD: The date dissolution was authorized: December 15, 2019

Effective date of dissolution if applicable: December 31, 2019

(no more than 90 days after dissolution file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

2

(voting group)

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)

Pan F. Eckstein

(Typed or printed name of person signing)

Pan F. Eckstein

(Title of person signing)

President

FILED  
CLERK OF COURT  
2019 DEC 26 PM 12:53

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: Premiere Research Sciences Inc

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

NAME, ADDRESS, AMOUNT & REASON FOR CLAIM

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

6019 Seminole Blvd Seminole, FL 33772

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

PAUL ECKSTEIN

Printed Name of the Person Filing

[Signature]

Signature of the Person Filing

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