## P13000068655

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SECRETARY OF STATE



## **COVER LETTER**

TO: Amendment Section			***		
Division of Corporations	<b>.</b>		•		
,					
SUBJECT: MEDICAL	office s	OF	DELRAY	BEACH	IN
DOCUMENT NUMBER:	13000062	655			
The enclosed Articles of Dissolution	n and fee are submitted	l for filing	<b>g</b> .		
Please return all correspondence con	cerning this matter to	the follow	ding:		
FERNANDO J. (Na  Phremos J.	IMENEZ A	1D			•
(Na	me of Contact Person)				
Swands 1	mener Mr.	) ·	٠.		٠.
	(Firm/Company)			<del></del>	
60 COMPASS	(Address)		·	<u>.                                    </u>	
	(Address)				
FT. LAUDERD	ALE. FL	. 3.	3308		
	ity/State and Zip Code				
For further information concerning t	his matter, please call:				
FER NAND SIME (Name of Contact Person)	NE 2MD, 954	1,6	751411		
(Name of Contact Person)	(Are	a Code &	Daytime Teleph	onc Number)	-
Enclosed is a check for the following	g amount:				
\$35 Filing Fee U \$43.75 Filing I Certificate of S		ру	S52.50 Filing Certificate of Certified Copy (Additional control of the control of	Status & Y	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amer Divis Clift	CET ADDRESS:  ndment Section  sion of Corporation  on Building  Executive Cente		

Tallahassee, 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 State:	
	MEDICAL OFFICES OF DELRAY BEACH	INC
SECOND:	The document number of the corporation (if known): P 13.000062655	
THIRD:	The date dissolution was authorized: 12.31. 2013	
	Effective date of dissolution if applicable: 12.31-2013  (no more than 90 days after dissolution file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	olution
	Dissolution was approved by the shareholders through voting groups.	4 APR
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	2
	The number of votes cast for dissolution was sufficient for approval by    Coting group   Coting	PMII: 47
	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)	
	FERNANDO SIMENEZ  (Typed or printed name of person signing)	
	PRES	
	(Title of person signing)	

Filing Fee: \$35