Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000069559 3)))



H150000695593#BC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

RECEIVED
15 MAY 19 MB 3:01
WEAN WEAT STATES TO BE A SECURE OF THE A SECURITY OF THE

DISSOLUTION OR WITHDRAWAL P.A PHARMACY INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

5 NAR 19 AN 9:00

Rectronic Filing Menu

Corporate Filing Menu

Help

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	f State:	
•	P.A Pharmacy Inc		
SECOND:	The document number of the corporation (if known): P130000	1556	4
THIRD:	The date dissolution was authorized: 3-19-15	, :	-
	Effective date of dissolution if applicable: (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 was sufficient for approval.	for dissoluti	οΩ
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group of to vote separately on the plan to dissolve:	entitled	
	The number of votes cast for dissolution was sufficient for approval by		
		* 選集	_
1	(voting group)		Hisk
	· .		9
			# S
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the bands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	THE PARTY	9: 08
	Pedro L. Chavez. (Typed or printed name of person signing)		
• ·	President		. ."
	FTitle of names timping)		