P1500000009951

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SECRETARY OF STAIL
DIVISION OF SOMPORATION

JUL 27 2015

COVER LETTER

*TO: Amendment Section Division of Corporations

SUBJECT: LA SALUD MEDICAL CENTER INC
OCUMENT NUMBER: P15000029951
he enclosed Articles of Dissolution and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
OBERTO DELGADO
(Name of Contact Person)
A SALUD MEDICAL CENTER INC
(Firm/Company)
415 SW 24 ST SUITE 203
(Address)
IIAMI FL 33155
(City/State and Zip Code)
or further information concerning this matter, please call:
OBERTO DELGADO at (
(Name of Contact Person) at ((Area Code & Daytime Telephone Number)
nclosed is a check for the following amount:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & \$\Bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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 LA SALUD MEDICAL CENTER INC	: :	
SECOND:	The document number of the corporation (if known):		
THIRD:	The file date of the articles of incorporation:		
FOURTH:	(CHECK AT LEAST ONE BOX)	,	
	None of the corporation's shares have been issued.	15 JUL	DIVISION PERSON
	The corporation has not commenced business.	24	
FIFTH:	No debt of the corporation remains unpaid.	PM 2:	のと Charles Artists A
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	 	
SEVENTH	: Adoption of Dissolution (CHECK ONE)		
	☐ A majority of the incorporators authorized the dissolution.		
	A majority of the directors authorized the dissolution.		
Sigr	(By a director president or other officer - if directors or officers have not been selected, by an incorporate in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	or - if	_
	ROBERTO DELGADO		
	(Typed or printed name of person signing)		
	PST		
	(Title of Person Signing)		

Filing Fee: \$35