

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407)841-1200
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**DISSOLUTION OR WITHDRAWAL
SURGICAL ROBOTICS MD, P.A.**

Certificate of Status	0
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C. GOLDEN

APR - 9 2018



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Attorneys and Counselors at Law
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CLAUDIA HAINES JONES
C.Jones@deanmead.com

April 5, 2018

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

Re: Surgical Robotics, MD, P.A.
Document Number P15000041334

Dear Sir/Madam:

The enclosed Articles of Dissolution and Notice of Dissolution are submitted for filing. Your filing fee, in the amount of forty-three and 75/100 dollars (\$43.75), which includes a Certified Copy of the Articles of Dissolution, has been paid via our Sunbiz Pre-Paid E-Filing Account.

Please return all correspondence concerning this matter to my attention at 7380 Murrell Road, Suite 200, Viera, FL 32940. Please contact me should you require anything further to complete the dissolution of the subject corporation.

Very truly yours,

A handwritten signature in cursive script that reads "Claudia Haines Jones". Below the signature, the name "Claudia Haines Jones" is printed in a standard font.
Claudia Haines Jones

CHJ:jq

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**ARTICLES OF DISSOLUTION
FOR
SURGICAL ROBOTICS MD, P.A.**

Pursuant to the provisions of Sections 607.1403 of the Florida Statutes, the undersigned Florida professional services corporation hereby adopts the following Articles of Dissolution:

ARTICLE I - NAME OF COMPANY

The name of the corporation is SURGICAL ROBOTICS MD, P.A., Florida document number P15000041334 (hereinafter referred to as the "Corporation").

ARTICLE II - EFFECTIVE DATE OF DISSOLUTION

The effective date of the Corporation's dissolution shall be upon filing of these Articles of Dissolution with the Florida Secretary of State.

ARTICLE III - APPROVAL OF DISSOLUTION

The dissolution was approved in accordance with the Plan of Complete Liquidation and Dissolution attached hereto and incorporated herein by reference as Exhibit "A" adopted by the sole Shareholder and Director of the Corporation by joint written consent dated April 4, 2018.

ARTICLE IV - PROVISION FOR LIABILITIES

All known debts, obligations and liabilities of the Corporation have been paid or discharged.

SURGICAL ROBOTICS MD, P.A.

By: 

Edgar Figueroa, President

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EXHIBIT A

**PLAN OF COMPLETE LIQUIDATION AND DISSOLUTION
OF SURGICAL ROBOTICS MD, P.A.
UNDER SECTION 331 OF THE INTERNAL REVENUE CODE**

1. As soon as possible following the adoption of this Plan of Complete Liquidation and Dissolution (the "Plan"), SURGICAL ROBOTICS MD, P.A. (hereinafter the "Corporation"), a Florida corporation, will cease the active conduct of its business, will wind up its affairs, will pay or provide for payment of all known obligations of the Corporation, and will liquidate and distribute all of its assets in complete liquidation, less any assets retained to meet claims.

2. The Director of the Corporation may from time to time authorize one or more distributions in cash or in kind, in a series of distributions in complete liquidation.

3. The foregoing distributions in complete liquidation shall be in exchange solely for, and in redemption and cancellation of, and in payment for, all of the outstanding capital stock of the Corporation.

4. This Plan shall be effective upon the approval and adoption of the Plan by the sole shareholder.

5. The officers and Director of the Corporation shall proceed with the voluntary dissolution of the Corporation under the laws of the State of Florida, including the filing of Articles of Dissolution.

6. The officers and Director of the Corporation are hereby authorized, empowered and directed to do all things and take all actions which they deem necessary or advisable to carry out the purposes and intentions of this Plan, including, without limitation, the execution and delivery of deeds, bills of sale, assignments, other instruments and documents, and the filing of returns and other documents with the appropriate officials of the State of Florida and the United States, including the final federal and state corporate income tax returns and Forms 1096 and 1099.

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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. 617.1402, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: SURGICAL ROBOTICS MD, P.A.

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 of Claimant: _____

Address of Claimant: _____

Amount of Claim: _____


Basis of Claim (attachment): _____

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

DEAN MEAD
Attention: CLAUDIA HAINES JONES, ESQ.
7380 Murrell Road, Suite 200
Melbourne, FL 32940

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.

Edgar Figueroa, M.D.
Printed Name of the Person Filing


Signature of Person Filing

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

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