

P180000007809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

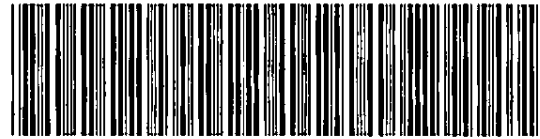
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Dawn R. Frost, President
2527 Frost Lane
Chipley, FL 32428

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

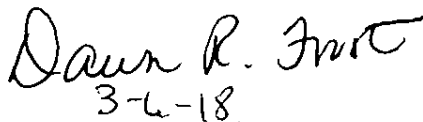
To whom it may concern;

Please find the article of Dissolution for **Beach Medical Concierge, PA**. If possible please send the Certificate of Status and Certified Copy to the following address:

Dawn Frost
2527 Frost Lane
Chipley, FL 32428

The address of the Corporation will no longer be in use. Thank you for your assistance.

Very respectfully,

A handwritten signature in black ink that reads "Dawn R. Frost". Below the signature, the date "3-6-18" is handwritten.

Dawn R. Frost, President
Beach Medical Concierge

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:
Beach Medical Concierge

SECOND: The document number of the corporation (if known): P18000007809

THIRD: The date dissolution was authorized: February 28, 2018

Effective date of dissolution if applicable: March 2, 2018

(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

Dawn R. Frost, President

(voting group)

Signature:

Dawn R Frost, President

(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)

Dawn R. Frost

(Typed or printed name of person signing)

President

(Title of person signing)