

P19000 CAI 235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

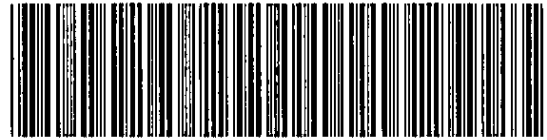
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Notice - dissolution

Office Use Only



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19 DEC 12 PM 3:53

FILED  
STATE  
CLERK  
OF  
MASSACHUSETTS

Dissolution

JUL 07 2020

D CUSHING

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Lody Jean, P.A.  
\_\_\_\_\_

**DOCUMENT NUMBER:** P19000041235  
\_\_\_\_\_

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lody Jean  
\_\_\_\_\_

(Name of Contact Person)

Lody Jean, P.A.  
\_\_\_\_\_

(Firm/Company)

782 NW 42 Avenue # 448  
\_\_\_\_\_

(Address)

Miami FL 33126  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

Lody Jean  
\_\_\_\_\_

at (305) 331 1530  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 6, 2020

LODY JEAN  
LODY JEAN, P.A.  
782 NW 42 AVENUE #448  
MIAMI, FL 33126

SUBJECT: LODY JEAN, P.A.  
Ref. Number: P19000041235

We have received your document for LODY JEAN, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Notice of Dissolution must contain a description of information that should be included in a written claim.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 120A00000277

## 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:  
Lody Jean, P.A.

SECOND: The document number of the corporation (if known): P19-000041235

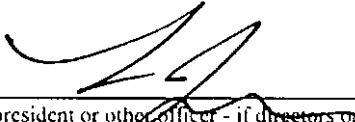
THIRD: The date dissolution was authorized: November 1, 2019

Effective date of dissolution if applicable: December 31, 2019  
(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: Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

19 DEC 12 PM 3:53  
Pub  
Notary Public  
State of Florida

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)

Lody Jean  
\_\_\_\_\_  
(Typed or printed name of person signing)

President  
\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35**