# P20000077453

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations SUBJECT: FRISBEE CHIROPRACTIC CENTER, P.A. P20000077453 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOSHUA HELLER, ESQ. (Name of Contact Person) HELLER ESPENKOTTER, PLLC (Firm/Company) 2701 PONCE DE LEON BOULEVARD, SUITE 301 (Address) CORAL GABLES, FLORIDA 33134 (City/State and Zip Code) For further information concerning this matter, please call: at ( Area Code & Daytime Telephone Number) JOSHUA HELLER (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee \$\sum \\$43.75 Filing Fee & \$\sum \\$\$43.75 Filing Fee & \$\sum \\$\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed)

### **Mailing Address:**

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

### Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## 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: FRISBEE CHIROPRACTIC CENTER, P.A.		
SECOND:	The document number of the corporation (if known):		
THIRD:	The file date of the articles of incorporation: SEPTEMBER 25, 2020		
FOURTH:	None of the corporation's shares have been issued.		
FIFTH:	No debt of the corporation remains unpaid.		
	The net assets of the corporation remaining after winding up, if any, have been distributed to the shareholders, if shares were issued.		
SEVENTH:	A majority of the incorporators or directors authorized the dissolution.		
Signa	ature:		
(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,)			
	(Typed or printed name of person signing)		
	(Title of Person Signing)		
	Filing Fee: \$35		