P93000045045

(Requestor's Name)
(requestors reame)
(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:

Office Use Only



200037536372

06/10/04--01017--022 **43.75

Voldis Tileurs

TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

Division of Corporations			
SUBJECT: EMERAEHCY ME	DILAC	Resourc	es Cirp.
DOCUMENT NUMBER: P93000	xx4504	ks	 .
The enclosed Articles of Dissolution and fe	ee are subr	nitted for filin	g.
Please return all correspondence concerning	g this matte	er to the follow	ving:
RICHARD A. CLINCE (Name of I	Person)		
(Name of I	Firm/Comp	pany)	 ,
6814 TIDEWATER	DRIV (Address)	E	* ************************************
NAVARRE, FL (City/S	3256 tate/and Z	ip Code)	e en
For further information concerning this mat-	ter, please	call:	
RICHARD A. CLINCHY (Name of Person)	at ((Ai	850) 9 ea Code & Da	82-4567 aytime Telephone Number)
Enclosed is a check for the following amour	nt:		
S35 Filing Fee \$\infty\$\$43.75 Filing Fee & Certificate of Status	Certified	l Copy nal copy is	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section		

Division of Corporations

Tallahassee, Florida 32399

409 E. Gaines Street

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 Department of State:				
	EMERGENCY MEDICAL RESOURCES GRP.				
SECOND:	The document number of the corporation (if known): P9300045045				
THIRD:	The date dissolution was authorized: 15-A06-03				
	Effective date of dissolution if applicable: 15-506-03 (no more than 90 days after dissolution file date)				
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 of 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				
	(voting group)				
	Signed this 7th day of JUNE 2004.				
Signatu	re: (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)				
	RICHTOD A. CLINCITY III (Typed or printed name of person signing)				
	SECRETARY (Title of person signing)				

Filing Fee: \$35