

P93000049241

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Vero Respiratory Care, Inc.

DOCUMENT NUMBER: P93000049241

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

Please return all correspondence concerning this matter to the following:

Jose Gibert

(Name of Contact Person)

Vero Respiratory Care

(Firm/Company)

436 Greytwig Road

(Address)

Vero Beach, FL 32963

(City/State and Zip Code)

For further information concerning this matter, please call:

Jose Gibert

(Name of Contact Person)

at (772) 234-4656

(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

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:

Vero Respiratory Care, Inc.

SECOND: The document number of the corporation: **P93000049241**

THIRD: The date dissolution was authorized: **July 1, 2011**
Effective date of dissolution: **July 1, 2011**

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The total number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

Signature: _____

Jose Gibert
(Typed or printed name of person signing)

VP of Operations / CEO
(Title of person signing)

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STATE
TALLAHASSEE, FLORIDA