P93000087544

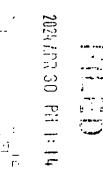
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CENTRAL FLORIDA ENDOCRINE & DIABETES CONSULTANTS, P.A.					
DOCUMENT NUMBER: P93000087544					
The enclosed Articles of Revocation of Dissolu	ation and fee are submitted for filing.				
Please return all correspondence concerning this	s matter to the following:				
Dr. C	arlos Pacheco				
Name of	Contact Person				
CENTRAL FLORIDA ENDOC	CRINE & DIABETES CONSULTANTS, P.A.				
Fim	n/Company				
635 N. N	MAITLAND AVE				
	Address				
	.AND, FL 32751				
City/Sta	te and Zip Code				
efendoerine@efendoerin E-mail address: (to be used f	or future annual report notification)				
For further information concerning this matter,	please call:				
Dr. Carlos Pacheco	At (_407) 629-4901				
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 & □ \$52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST:	The name of the corporation is: CENTRAL FLORIDA ENDOCRINE & DIABETES	CONSULT	ANTS. F	'.A.	
SECOND:	The document number of the corporation (if known) is P93000087544				
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution				
	filed with the Florida Department of State is March 8, 2024 Note: If the date inserted in this block does not meet the applicable statutory filing not be listed as the document's effective date on the Department of State's records.	requireme	nts. this	date will	
FOURTH:	The Revocation of Dissolution was authorized on April 23, 2024				
FIFTH:	Adoption of Revocation of Dissolution (check one)				
	 The board of directors/incorporation revoked the dissolution. The board of directors revoked the dissolution authorized by the sharevocation was permitted by action by the board of directors alone pauthorization. The shareholders revoked the dissolution and was authorized by the manner required by this chapter and by the articles of incorporation. 	ursuant to sharéhol	othat	the	
SIXTH:	A copy of the Articles of Dissolution is attached.	•	30	******	
	Signature (By a director, president or other utilice + 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)		Pii 1: 14	g * u maner , maner ,	
	Dr. Carlos Pacheco				
	(Typed or printed name of person signing)				
	Mgr				
	(Title of person signing)				

FILING FEE \$35



ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

The name of the corporation as currently filed with the Florida Department of State: FIRST:

CENTRAL FLORIDA ENDOCRINE & DIABETES CONSULTANTS, P.A.

SECOND: The document number of the corporation: P93000087544

The date dissolution was authorized: March 8, 2024 THIRD:

Effective date of dissolution: March 11, 2024

Dissolution was approved by the shareholders in the manner required by this chapter and by Articles of Incorporation. FOURTH:

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: CARLOS A. PACHECO DR/MGR

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED Mar 11, 2024 Secretary of State

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

Name of Corporation:

CENTRAL FLORIDA ENDOCRINE & DIABETES CONSULTANTS, P.A.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

A BRIEF DESCRIPTION OF THE NATURE OF THE CLAIM, THE AMOUNT OF THE CLAIM, AND THE DATE IN WHICH THE CLAIM WAS INCURRED.

Mailing address where claims can be sent:

635 N MAITLAND AVE MAITLAND, FL 32751

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: CARLOS A. PACHECO

Electronic Signature of the Person Filing