

P9400081587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

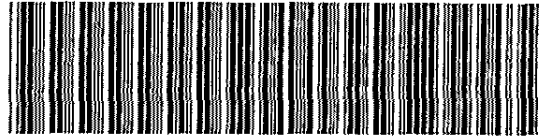
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000040786970

09/13/04--01029--001 **35.00

09/13/04--01029--002 **8.75

FILED
04 SEP 13 PM 3:16
CLERK OF STATE
TALLAHASSEE, FLORIDA

As 9/20/04
Disinfective

PAUL D. SELTZER, D.O.

ORTHOPEDIC, JOINT AND HAND SURGERY

Telephone (561) 848-0330

2051 Forty-Fifth Street, Suite 101
West Palm Beach, FL 33407-2028

September 9, 2004

Florida Dept of State
Amendment Section - Div of Corp.
Po Box 6327
Tallahassee FL 32314

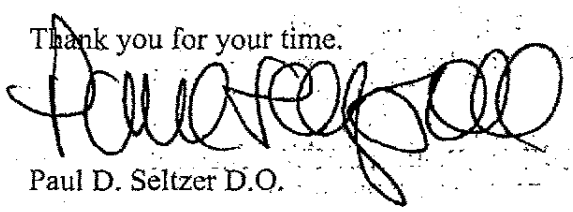
Re: IPA & FIPA

To Whom It May Concern:

Please find enclosed dissolution papers with attached checked.
We are requesting that a certified copy of the dissolution (checks enclosed) be mailed to
us at:

IPA C/O Paul Seltzer D.O.
2051 45th St, #101
West Palm Beach, FL 33407

Thank you for your time.



Paul D. Seltzer D.O.

INDEPENDENT PHYSICIANS ASSOCIATION REGION IX, INC.

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

I.

The name of the corporation is INDEPENDENT PHYSICIANS ASSOCIATION REGION IX, INC.

II.

The Articles of Incorporation were filed on November 7, 1994.

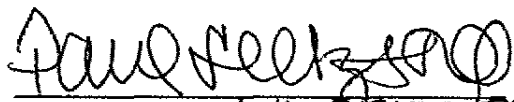
III.

The date dissolution was authorized is 7-21-04.

IV.

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

Signed on 9-9-, 2004


Print Name: PAUL SELTZER
Title: PRESIDENT