

P94000093796

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



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MAIL

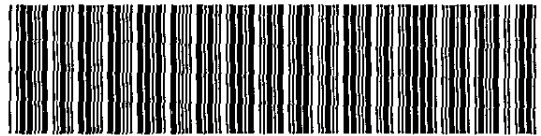
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Promedco of Southwest Florida, Inc.

**DOCUMENT NUMBER:** 8940000 93796

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

Please return all correspondence concerning this matter to the following:

Michele Thomas

(Name of Person)

Atropos, Inc.

(Name of Firm/Company)

8100 Washington Ave., Suite 1000

(Address)

Houston, TX 77007

(City/State/and Zip Code)

For further information concerning this matter, please call:

Michele Thomas

(Name of Person)

at (713) 552-9834

(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, Florida 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## 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:

Promedco of Southwest Florida, Inc.

SECOND: The document number of the corporation (if known):

P9400009379

THIRD: The date dissolution was authorized:

6/28/02

Effective date of dissolution if applicable:

(no more than 90 days after dissolution effective date)

FOURTH: Adoption of Dissolution (CHECK ONE)



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



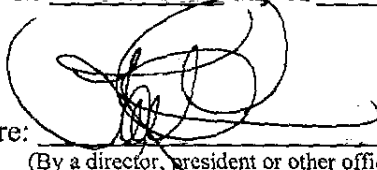
Dissolution was approved by of the shareholders through voting groups.

*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 16<sup>th</sup> day of May, 2005

Signature: 

(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)

Karen Nicolaou

(Typed or printed name of person signing)

Corporate Secretary

(Title of person signing)

**Filing Fee: \$35**

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