

P95000020193

Polyclinic Enterprises, Inc.

15600 NW 67th Ave., Suite 306
Miami Lakes, Florida 33014

Phone: (305) 362-5516
Fax: (305) 827-1581

September 16, 1997

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attn.: Ms. Thelma Lewis, Corporate Specialist Supervisor

Subject: Polyclinic Enterprises Inc.,
Ref. Number: P95000020193
Letter Number: 797A00039781

As per your letter dated August 5, 1997, please find Articles of Dissolution in compliance with section 607.1403, and a check in the amount of \$87.50 to cover for the filing of a certificate of withdrawal and for a certified copy of the dissolution.

Sincerely,

POLYCLINIC ENTERPRISES, INC.


Jose A. Orcasita-Ng, MD
President

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DIVISION OF CORPORATIONS
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CC



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 5, 1997

JOSE A. ORCASITA-NG, MD
POLYCLINIC ENTERPRISES, INC.
15600 NW 67TH AVE., SUITE 306
MIAMI LAKES, FL 33014

SUBJECT: POLYCLINIC ENTERPRISES, INC.
Ref. Number: P95000020193

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. For each certified copy requested, please add an additional \$52.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6905.

Thelma Lewis
Corporate Specialist Supervisor

Letter Number: 797A00039781

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 is: POLYCLINIC ENTERPRISES, INC.

SECOND: The date dissolution was authorized: DECEMBER 30, 1996

THIRD: 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 vote of the shareholders through voting groups.

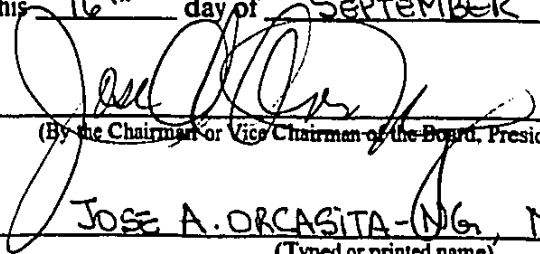
The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signed this 16TH day of SEPTEMBER, 19 97

Signature


(By the Chairman or Vice Chairman of the Board, President, or other officer)

JOSE A. ORCASITA-ING, M.D.
(Typed or printed name)

PRESIDENT

(Title)

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