P950000 58660

Mark I. Delman, DDS
Welleby Dental Associates, PA
10127 W. Oakland Park Blvd.
Sunrise, FL 33351

City/State/Zip   Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

400002560204--2
-06/16/98--01009--016
*****87.50 *****87.50

1. _____
   (Corporation Name)   (Document #)

2. _____
   (Corporation Name)   (Document #)

3. _____
   (Corporation Name)   (Document #)

4. _____
   (Corporation Name)   (Document #)

☐ Walk in   ☐ Pick up time _____   ☐ Certified Copy

☐ Mail out   ☐ Will wait   ☐ Photocopy   ☐ Certificate of Status

NEW FILINGS		AMENDMENTS	
	Profit		Amendment
	NonProfit		Resignation of R.A., Officer/ Director
	Limited Liability		Change of Registered Agent
	Domestication		Dissolution/Withdrawal
	Other		Merger

OTHER FILINGS		REGISTRATION/ QUALIFICATION	
	Annual Report		
	Fictitious Name		Foreign
	Name Reservation		Limited Partnership
			Reinstatement
			Trademark
			Other

Diss.
6-18-98

CR2E031(1/95)

Examiner's Initials	CC

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:_____

_____ A Town Square Dental Center, PA _____

SECOND: The date dissolution was authorized:_____ 6/11/98 _____

THIRD: Adoption of Dissolution   (CHECK ONE)   Tave IP
                                                          65-0599 200

☑ 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 __11th__ day of __June_____, 19 _98_.

Signature _____ Mark J Delman, president _____
          (By the Chairman or Vice Chairman of the Board, President, or other officer)

_____ Mark I Delman, President _____
                (Typed or printed name)

_____ President _____
                (Title)