P9700009558

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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: DISSOLUTION A	edical OTESILE ProPERTIES, JIV
DOCUMENT NUMBER: P9700000	9558
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this	natter to the following:
WALTER SMITHWICK	, 111, MD
(Name of Contact	ct Person)
N/A	
(Firm/Con	pany)
4708 PRINCE (Address	EDWARD RD.
(Address)
Jacksonuille, F (City/State and	TORIDA - 32210
(City/State and	Zip Code)
For further information concerning this matter, pl	ease call:
(Name of Contact Person)	at (904) 608 0822 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Ad	3.75 Filing Fee & \$\sum \\$52.50 Filing Fee, tified Copy Certificate of Status & Certified Copy closed) (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 Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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: MEDICAL OFFICE PROPERTIES, INC.	
SECOND:		,
THIRD:	The file date of the articles of incorporation: April 27/2011 Vissola Con	j
FOURTH:	The document number of the corporation (if known): P97000009558 The file date of the articles of incorporation: April 27/2011) Dissolution (CHECK AT LEAST ONE BOX) DATE OF INCORPORATION 12/31/97	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	,
SEVENTH:	Adoption of Dissolution (CHECK ONE)	•
	A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution.	. <i>-</i>
	A majority of the directors authorized the dissolution.	
Sign	ature: Nath Smithwift !!! (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.)	
	(Typed or printed name of person signing)	
	PRESIDENT (Title of Person Signing)	

Filing Fee: \$35