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## COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolu	ution of S-Chapter Corporatio	n		_	
DOCUMENT NU	P98000022153				
The enclosed Arti	cles of Dissolution and f	ee are submitted for filing	<b>,</b> ,		
Please return all co	orrespondence concerning	g this matter to the follow	ing:		
Robert Gastón, Jr					
· · · · · · · · · · · · · · · · · · ·	(Name of	Contact Person)			
Quan Yin Medical Ce	enter, PA				
	(Fim	n/Company)			
1815 NE 36th Avenue	2		( *2	202	
	(A	ddress)		2073 APR 2	
Homestead, FL 33033	3			R 21	7:-4
	(City/Sta	te and Zip Code)	57 29		17
For further inform	ation concerning this ma	tter, please call:	7.5 7.5 7.5 7.5 7.5 7.5 7.5 7.5 7.5 7.5	PM 4:40	F-124
Robert Gastón, Jr		at ( (305) 758-7011			
(Name o	of Contact Person)	(Area Code)	(Daytime Telephone N	\umb	ег)
Enclosed is a chec	k for the following amou	nt:			
■ \$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)		
54 H. A.J.		Camaa	t Address		

## Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## **Street Address:**

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



April 3, 2023

ROBERT GASTON, JR. QUAN YIN MEDICAL CENTER, P.A. 1815 NE 36TH AVENUE HOMESTEAD, FL 33033

SUBJECT: QUAN YIN MEDICAL CENTER, P.A.

Ref. Number: P98000022153

We have received your document for QUAN YIN MEDICAL CENTER, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 623A00007523



## 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:					
	Quan Yin Medical Center, PA					
SECOND:	The document number of the corporation (if known):					
THIRD:	The date dissolution was authorized:					
	Effective date of dissolution if applicable:  (no more than 90 days after dissolution file date)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.					
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.					
	Signature:  (By a director, president br 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)					
	Robert Gastón, Jr.					
	(Typed or printed name of person signing)					
	President					
	(Title of person signing)					

Filing Fee: \$35