

P98000023443

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : MICHAEL D. HORLICK, P.A.
Account Number : 072100000126
Phone : (941) 484-5656
Fax Number : (941) 484-1650

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05 DEC 27 AM 8:00

DIVISION OF CORPORATIONS

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DISSOLUTION

VISION FAMILY MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

12/27/05

DC

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Voluntary Diss.

w/Notice

Fax Audit Number: H050002920983

**ARTICLES OF DISSOLUTION
OF
VISION FAMILY MANAGEMENT, INC.
(Document Number: P98000023443)**

The undersigned, for the purpose of dissolving **VISION FAMILY MANAGEMENT, INC.** (the "Corporation") under the Florida Business Corporation Act, hereby adopts the following Articles of Dissolution for the Corporation;

1. **Corporate Name.** The name of this corporation is **VISION FAMILY MANAGEMENT, INC.**

2. **Incorporation Date.** The Corporation was incorporated under the laws of the State of Florida on March 9, 1998.

3. **Dissolution Authorization Date.** The date the dissolution of the Corporation was authorized was November 30, 2005.

4. **Shareholder Vote or Consent to Dissolution.** The dissolution of the Corporation was approved by the unanimous written consent of all of its shareholders effective as of November 30, 2005.

IN WITNESS WHEREOF, these Articles of Dissolution have been executed and delivered this 30th day of November, 2005.

VISION FAMILY MANAGEMENT, INC.

By: *Eugene H. Beckstein*
Eugene H. Beckstein, President

Michael D. Horlick, P.A.
1314 L. Venice Ave., Ste. D
Venice, FL 34285
(941) 484-5656
FL Bar No.: 0292583

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**NOTICE OF CORPORATE DISSOLUTION
OF
VISION FAMILY MANAGEMENT, INC.**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in S. 607.1407, F.S.

1. Name of Corporation: **VISION FAMILY MANAGEMENT, INC.**
2. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.
3. Description of information that must be included in a claim:
 - Name of Claimant
 - Address of Claimant
 - Amount of Claim
 - Basis of Claim
4. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Vision Family Management, Inc.
7418 Westmoreland Drive
Sarasota, Florida 34243
5. A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

VISION FAMILY MANAGEMENT, INC.

By: Eugene H. Beckstein
Eugene H. Beckstein, President

Fee: No charge if included with the Articles of Dissolution. If filed separately \$ 35.00.
Notice of Corporate Dissolution.wpd

Fax Audit Number: H050002920983