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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : HOLLAND & KNICHT

Account Number : 072100000016 Phone

± (813)227-8500

Fax Number

: (813)901-4201

DISSOLUTION OR WITHDRAWAL STEVEN D. LEAR, P.A.

DEC	1	9	2018

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

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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 Sta Seven D. Lear, P.A.	ite:					
SECOND:	The document number of the corporation (if known):		_				
THIRD:	The date dissolution was authorized:						
	Effective date of dissolution if applicable:						
	(so 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:	Adoption of Dissolution (CHECK ONE)						
	Dissolution was approved by the shareholders. The number of votes east for ewas sufficient for approval.	lissolu	tion				
	☐ Dissolution was approved by the shareholders through voting groups.						
	The following statement must be separately provided for each voting group entitl to vote separately on the plan to dissolve:	ed					
	The number of votes east for dissolution was sufficient for approval by		18 D				
			<u> </u>				
	(voling φιουηι)	.24 90 10 10 10	CO Torre				
	Signature: Stur DROM	:	10: 25				
	(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 followery, by that fiduciary)						
	Steven D. Lear (Typed or printed name of person signing)		_				
	President						
•	(Title of person signing)						

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 507.1407, F.S. This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: Steven D. Lear, P.A. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: The name of the claimant, the date of the claim, the event giving rise to the claim, the amount claimed, and the name, address and telephone number of contact to whom the corporation should reply to regarding the claim Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) c/o Steven D. Lear 701 Brickell Avenue, Suite 3300 Miami, Florida 33131 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. Steven D. Lear Printed Name of the Person Filing