P98000063472

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
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SECRETARY OF STATE

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 18, 2005

MAZZEI ORTHODONTICS, PA % BEVERLY OR LEANNE 7301 -A WEST PALMETTO PARK RD., STE 104C BOCA RATON, FL 33433

SUBJECT: MAZZEI ORTHODONTICS, P.A.

Ref. Number: P98000063472

We have received your document for MAZZEI ORTHODONTICS, P.A. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Upon receipt of your check and cover letter, there was no completed dissolution form. For you convenience please find a form enclosed.

Riease return your document, along with a copy of this letter, within 60 days of your filling will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut Document Specialist

Letter Number: 205A00035691

COVER LETTER

TO: Amendment Section

Tallahassee, Florida 32314

Division of Corporations	-
SUBJECT:ARTICLES OF DISSOLUT	TION (VOLUNTARY)
DOCUMENT NUMBER: P980000634	472
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this	natter to the following:
BEVERLY EKKEBUS or LEANNE M	AZZEI
(Name of P	erson)
MAZZEI ORTHODONTICS, PA - C/O	FMC
(Name of Firm/	Company)
7301-A WEST PALMETTO PARK ROA	
(Address)
BOCA RATON, FL 33433	A TOTAL TOTAL TOTAL TOTAL
(City/State/and	Zip Code)
For further information concerning this matter, p	lease call:
BEVERLY EKKEBUS	at (561) 391-5126
(Name of Person)	at (561) 391-5126 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Ac	3.75 Filing Fee & S52.50 Filing Fee, rtified Copy Certificate of Status & Iditional copy is Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

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:		
	MAZZEI ORTHODONTICS, P.A.		
SECOND:	The document number of the corporation (if known): P98000063472 S		
THIRD:	The date dissolution was authorized: 09/30/2003		
	Effective date of dissolution if applicable; (no more than 90 days after dissolution illedate)		
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.		
	☐ Dissolution was approved by 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 24th day of MAY , 2005		
	Y Joseph AND		
	Signature: Komme Mezzyi, ODS.		
	(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)		
	LEANNE MAZZEI, D.D.S.		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35