## P99000004945

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4 Jun

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** SUBJECT: Dissolution of Medical-Legal Specialty Associates, Inc. DOCUMENT NUMBER: P99000004945 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sharon A. Inguiggato (Name of Contact Person) Medical-Legal Specialty Associates, Inc. (Firm/Company) 8002 Old Tramway Dr. (Address) Melbourne, FL 32940 (City/State and Zip Code) For further information concerning this matter, please call: Sharon A. Inquiggato (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## 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	nt of Sta	te:	
	Medical-Legal Specialty Associates, Inc.			
SECOND:	The document number of the corporation (if known): P990000494	5		
THIRD:	The file date of the articles of incorporation: 01-14-1999			
FOURTH:	(CHECK AT LEAST ONE BOX)	Per 8	⊋ 2	
	None of the corporation's shares have been issued.	CIRE TA	APR -	
	The corporation has not commenced business.	RY OF	2 PM	
FIFTH:	No debt of the corporation remains unpaid.	STA	-: 5 -: 5	Ç
SIXTH:	The net assets of the corporation remaining after winding up have been disto the shareholders, if shares were issued.	stributed	<b>≈</b>	٠
SEVENTH:	Adoption of Dissolution (CHECK ONE)			
	✓ A majority of the incorporators authorized the dissolution.			
	A majority of the directors authorized the dissolution.			
Sign	ature: Shure of Sources of Officers have not been selected, by an	n incorpora	tor - if	ŗ
	in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)			
	Sharon A. Inguiggato			
	(Typed or printed name of person signing)			
	President			
	(Title of Person Signing)			

Filing Fee: \$35