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TALLAHASSLE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations			
SUBJECT: KRAH	MEDIC	AL CORPORATION	·
DOCUMENT NUMBER:	P 99 000	096410	-
The enclosed Articles of Dis	solution and	fee are submitted for fili	ng.
Please return all corresponde	nce concernir	ng this matter to the follo	wing:
Dr. Rolf Kra	h		
	(Name of	Person)	
	(Name of	Firm/Company)	
6103 DEER RL	IN	والمناور وال	
An.	~	(Address)	
FORT MYERS,	FL 33	908	
	(City/	State/and Zip Code)	
For further information conce	erning this ma	atter, please call:	
Roy Krah		at (239)	267-3120 Daytime Telephone Number
(Name of F	'erson)	(Area Code & I	Daytime Telephone Number
Enclosed is a check for the fo	ollowing amo	unt:	
\$35 Filing Fee \$43.75 Certification	Filing Fee & ate 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)
MAILING ADDRES Amendment Section Division of Corporat P.O. Box 6327 Tallahassee, Florida 3	ions	Ar Di 40	REET ADDRESS: nendment Section vision of Corporations DE. Gaines Street llahassee, 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 Department of States
	KRAH MEDICAL CORPORATION
SECOND:	The name of the corporation as currently filed with the Department of State St
THIRD:	The date dissolution was authorized: February 26, 2004
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)
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 26th day of February , 2004.
Signat	ure: Albeh
_	(By a director, president or other officer - if directors or officers have not been selected, by an i neorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	DR. ROLF KRAH
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35