## 517410

(Re	equestor's Name)	
(Ad)	dress)	
(Au	uiess)	
. (Ad	dress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAiL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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T. Roberts FEB 012700

## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
SUBJECT: DISSOLUTION ON SWIZE	nce Dentures, Inc.	
DOCUMENT NUMBER: Plande	2) Charles #517410	
The enclosed Articles of Dissolution and fe	e are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Eli M	. Temberg	
(Name of Contact Person)		
Gnourance	Ventures, Mc.	
9100 5. Dade	land Blud, #900	
Midmy DP	Idress) $\frac{33150}{6}$ e and Zip Code)	
For further information concerning this matt	•	
Eli Tembera (Name of Contact Person)	at (305) 670-5555 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amoun	nt:	
	\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$\$\$ Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS:  Amendment Section  Division of Corporations  Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

## 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:
	Insurance Dentures, Onc.
SECOND:	The document number of the corporation (if known): Norda Charter#5 17410
THIRD:	The date dissolution was authorized: 123107
	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 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)
	Signature:  (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)
	Eli M. Feinberg  (Typed or printed name of person signing)
	Partner (Title of person signing)

Filing Fee: \$35