

S39999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

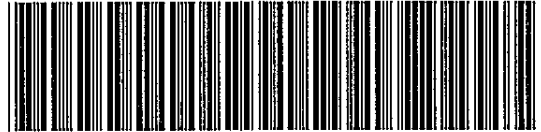
(Document Number)

Certified Copies _____

Certificates of Status ☒

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12/15/05 --01021 --003 **43.75

FILED
05 DEC 15 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dissolution

T BROWN DEC 27 2005

BESSEMER TRUST
222 ROYAL PALM WAY
PALM BEACH, FL 33480

SUSAN L. ANDERSON, CTFA
VICE PRESIDENT

561-655-4030
FAX: 561-655-4699
ANDERSON@BESSEMER.COM

December 12, 2005

VIA Certified Mail

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

Enclosed please see a check in the amount of \$43.75. This amount represents filing fees for the Dissolution of Corporation as well as the Certificate of Status.

Kindly forward a Certificate of Status to my attention at the address on this letterhead once the enclosed documentation has been filed.

Thank you for your assistance.

Sincerely,



Susan L. Anderson

SLA/tp

Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation - Samuel N. Lipsett, M.D. Inc.

DOCUMENT NUMBER: S39999

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Susan L. Anderson

(Name of Contact Person)

Bessemer Trust

(Firm/Company)

222 Royal Palm Way

(Address)

Palm Beach, FL 33480

(City/State and Zip Code)

For further information concerning this matter, please call:

Susan L. Anderson

(Name of Contact Person)

at (561) 655-4030

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate 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 ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
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:

Samuel N. Lipsett, M.D., Inc.

SECOND: The document number of the corporation (if known): S39999

THIRD: The date dissolution was authorized: 12 - 5 - 2005

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)

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)

Dr. Samuel N. Lipsett

(Typed or printed name of person signing)

Principal / President

(Title of person signing)

Filing Fee: \$35

FILED
05 DEC 15 AM 8:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA