

# V58143

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

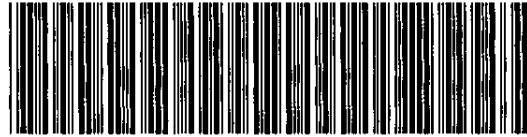
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/04/12--01006--007 \*\*35.00

2012 SEP -4 PM 3:16  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*oor*  
*9/6/12*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of Mark C. Monroe M.D.P.A.

**DOCUMENT NUMBER:** V58143

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

Please return all correspondence concerning this matter to the following:

MARK C. MONROE M.D.  
(Name of Contact Person)

8005 Whisper Lake Lane E.  
(Firm/Company)  
(Address)

Ponte Vedra Beach, FL 32082  
(City/State and Zip Code)

For further information concerning this matter, please call:

MARK C. MONROE M.D. at 904, 571-3786  
(Name of Contact Person) (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 ~~supplies~~ **FILED** the following articles of dissolution:

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FIRST: The name of the corporation as currently filed with the Florida Department of State, Tallahassee, Florida:

MARK C. MONROE M.D. P.A.

SECOND: The document number of the corporation (if known): V58143

THIRD: The date dissolution was authorized: 8-24-12

Effective date of dissolution if applicable: 8-31-12  
(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: Mark C. Monroe MD

(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)

Mark C. Monroe M.D.

(Typed or printed name of person signing)

President

(Title of person signing)

**Filing Fee: \$35**