

Sep 28 2006 3:04 PM

Donica Law Firm, P.A.

813-878-9746

p. 1

Division of Corporations

<http://efile.sunbiz.org/scripts/efilecovr.ex>

531420

Florida Department of State

Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000239728 3)))



H060002397283ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)205-0380

From: Account Name : DONICA LAW FIRM, P.A.
Account Number : I19990000195
Phone : (813)878-9790
Fax Number : (813)878-9746

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 SEP 28 AM 9:47

FILED

RECEIVED
06 SEP 28 AM 8:00
DIVISION OF CORPORATIONS

DISSOLUTION OR WITHDRAWAL

GULF COAST CHIROPRACTIC CLINIC, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

117

((H 060002397283))

FILED
06 SEP 28 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Gulfcoast Chiropractic Center, Inc.

SECOND: The document number of the corporation (if known): 531420

THIRD: The date dissolution was authorized: September 22, 2006

Effective date of dissolution if applicable: September 22, 2006
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ (X) 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)

V. John Brook, Jr.

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

((H 060002397283))