## Requester's Name Koussie (221 Snowbell PL West Palm Bruch, R 33414 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time ☐ Walk in Photocopy Certificate of Status Will wait Mail out **NEW FILINGS AMENDMENTS** ☐ Profit ■ Amendment Resignation of R.A., Officer/Director Not for Profit ☐ Limited Liability ☐ Change of Registered Agent ☐ Dissolution/Withdrawal Domestication Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report ☐ Foreign ☐ Fictitious Name ☐ Limited Partnership Reinstatement Trademark **VS**\_ FEB לצצו א Other

**Examiner's Initials** 

CR2E031(7/97)

## ARTICLES OF DISSOLUTION

FILED

99 FEB - 1 PH 2: 04

SECRETARY OF STATE
ALLAHASSEE

SECRETARY OF STATE
Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the FLORIDA
following articles of dissolution:

FIRST:	The name of the corporation is: BUSSIE CHIROPRACTIC CENTER, INC.
SECOND:	The date dissolution was authorized: 31 October 1998
THIRD:	Adoption of Dissolution (CHECK ONE)
Diss was	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
☐ Diss	olution was approved by vote of the shareholders through voting groups.
	the following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
-	(voting group)
Signe	d this 27 day of January, 19 99.
Signature _	(By the Chairman or Vice Chairman of the Board, President, or other officer)
	Delores L. Bussie, D.C.
	(Typed or printed name)
	President
	(Title)