

m 8 5 4 0 1

ADVANCED COMFORT PAIN CONTROL

P. O. Box 1508

Ormond Beach, FL 32175-1508

March 13, 2000

100003187431--5

TO WHOM IT MAY CONCERN:

Attached are all documentation needed per Carol, Louise and Susan to revoke the dissolution of my company, Advanced Comfort Pain Control, Inc. and to dissolve the corporation of Advanced Electromedicine Equipment, Inc. All forms filled out per instruction by Louise this date.

If you have any questions, please do not hesitate to contact me.

Thank you for your assistance in this matter.

Sincerely,


Jeri Francoeur

FILED

00 MAR 27 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

fee waived
per JK

DISS.

S. PAYNE MAR 28 2000



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 9, 2000

COMFORT PAIN CONTROL
P.O. BOX 1508
ORMOND BEACH, FL 32175-1508

SUBJECT: ADVANCED ELECTROMEDICINE EQUIPMENT, INC.
Ref. Number: M85401

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 487-6916.

Carol Mustain
Corporate Specialist

Letter Number: 200A00013132

ARTICLES OF DISSOLUTION

correct form

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

FIRST: The name of the corporation is: ADVANCED ELECTRO-MEDICINE EQUIPMENT, INC.

SECOND: The date dissolution was authorized: 6-1-99

THIRD: 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 vote 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

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00 MAR 27 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 4th day of JANUARY, 2000.

Signature

Jeri Francoeur, President
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Jerri FRANCOEUR

(Typed or printed name)

PRESIDENT

(Title)

filled out per house