N06000000395

(Phyllis L. Edams)

Society of Emergency Medicine Physician Assistants, Inc

(Requestor's Name)

P.O.Box 619911

(Address)

Dallas, TX 75261 - 9911

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TBrown 6-2-11

Society of Emergency Medicine Physician Assistants

May 18, 2011

Cert Mail # 7008 1140 0001 7249 0958

Secretary of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314- 2661

SUBJECT: Dissolution of Society of Emergency Medicine Physician Assistants, Inc.

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

Please return ~~all correspondence~~ concerning this matter to the following:

Phyllis L. Edans
Society of Emergency Medicine Physician Assistants, Inc.
PO Box 619911
Dallas, TX 75261-9911

For further information concerning this matter, please call:
Phyllis L. Edans at 972-550-0911 x 3130

Enclosed is a check in the amount of $52.50:

$35.00 – Filing Fee
$ 8.75 - Certificate of Status
$ 8.75 - Certified Copy (additional copy is enclosed).

Cordially,

P L Edans

Phyllis L. Edans, CPA, CAE
Assistant Secretary-Treasurer / CFO

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

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

Society of Emergency Medicine Physician Assistants, Inc.

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2011 MAY 23 [illegible]:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

THIRD: Adoption of Dissolution

SECTION I
If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

- [x] The date of the meeting of members at which the resolution to dissolve was adopted February 21, 2011. The number of votes cast by the members was sufficient for approval.

- [ ] The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

FOURTH: Effective date of dissolution: **February 28, 2011**

Signature ____________________

Typed or printed name of the person signing: **Phyllis L. Edans**

Title of person signing: **Assistant Secretary-Treasurer**

FILING FEE: $35