

N990000002160

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Spine and Scoliosis Aetiology Foundation, Inc.

DOCUMENT NUMBER: N99000002160

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

Please return all correspondence concerning this matter to the following:

Stanley E. Sacks

(Name of Contact Person)

Spine and Scoliosis Aetiology Foundation, Inc.

(Firm/Company)

4881 N.W. 5th Lane

(Address)

Boca Raton, FL 33431-4625

(City/State and Zip Code)

For further information concerning this matter, please call:

Stanley E. Sacks

(Name of Contact Person)

at (561) 368-7666

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2011

STANLEY E. SACKS
SPINE AND SCOLIOSIS AETIOLOGY
4881 N.W. 5 LANE
BOCA RATON, FL 33431

SUBJECT: SPINE AND SCOLIOSIS AETIOLOGY FOUNDATION, INC.
Ref. Number: N99000002160

We have received your document for SPINE AND SCOLIOSIS AETIOLOGY FOUNDATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 811A00010747

Rec'd 6/17/11

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:

Spine and Scoliosis Aetiology Foundation, Inc.

SECOND: The document number of the corporation (if known): N99000002160

THIRD: Adoption of Dissolution
(COMPLETE SECTION I OR II)

SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

- ☐ The date of the meeting of members at which the resolution to dissolve was adopted
_____. 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.

SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was April 10, 2011.

The number of directors in office was 2 and the vote for resolution was
2 for and 0 against. (must be a majority vote)

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FOURTH: Effective date of dissolution if applicable: April 30, 2011
(no more than 90 days after dissolution file date)

Signature Stanley E. Sacks
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Stanley E. Sacks
(Typed or printed name of the person signing)

President
(Title of person signing)

FILING FEE: \$35