

P00000031985

Requester's Name

Address

City/State/Zip

Phone #

300005336573--7
-04/24/02--01033--008
*****35.00 *****35.00

Use Only



HARRY G. GLEN, M.D., P.C.

BOARD CERTIFIED EYE PHYSICIAN & SURGEON
P.O. BOX 2282 ELKINS, WV 26241

P.O. BOX 8919

JUPITER, FL 33468

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☐ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

CR2E031(7/97)

Examiner's Initials

02 APR 24 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

P00000031985
FL Diss 288-01
4-24-02

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 is: VAVITY CARE, INC.

SECOND: The date dissolution was authorized: 12/31/2001

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.

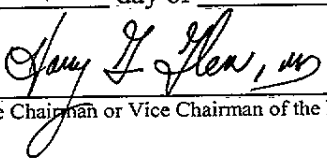
The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signed this 31 day of DEC, 2001.

Signature


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

HARRY G. GLEN, MD

(Typed or printed name)

President

(Title)

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02 APR 24 PM 12:05
CLERK OF STATE
TALLAHASSEE, FLORIDA