

P00000103474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500058422785

08/18/05--01014--014 \*\*43.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 AUG 15 PM 3:06

Volum. Diss.

08/18/05

Dc

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of Corporation

**DOCUMENT NUMBER:** P000000103474

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

Please return all correspondence concerning this matter to the following:

Bill Cordani  
(Name of Person)

Dyno-Medical Products Inc  
(Name of Firm/Company)

3021 Jupiter Park Circle #106  
(Address)

Jupiter, FL 33458  
(City/State/and Zip Code)

For further information concerning this matter, please call:

Bill Cordani at (561) 747-2301  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

pay to - Florida Dept of State

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## 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 as currently filed with the Florida Department of State:

DYN-O-MEDICAL PRODUCTS, INC.

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

P000000103474

THIRD: The date dissolution was authorized:

AUGUST 1, 2005

Effective date of dissolution if applicable: \_\_\_\_\_

(no more than 90 days after dissolution file date)

FOURTH: 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 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 1<sup>st</sup> day of AUGUST, 2005.

Signature:

William A. Cordani Peter J. Cordani  
(By a director, president or other officer - if directors or officers have not been selected by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

WILLIAM A. CORDANI

(Typed or printed name of person signing)

Peter J Cordani

ASSISTANT TO CEO PETER J. CORDANI

(Title of person signing)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 AUG 15 PM 3:06

Filing Fee: \$35