Florida Department of State

Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000162538 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6360

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

: (305)552-5973

Phone Fax Number

: (305)220-1440

DISSOLUTION OR WITHDRAWAL

GEMINI ORTHOPEDIC, CORP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

6/30/2008 10:29 AM

1 (1

FROM : LAZARUS

FAX NO. :3052201440

H08000162538

ARTICLES OF DISSOLUTION

ursuant to s of dissolutio	ection 607.1403, Florida Statutes, this Florida profit corporation submits the following articles at:		
TRST:	The name of the corporation as currently filed with the Florida Department of State:		
	Gemini Orthopedic Corp		
ECOND:	The document number of the corporation (if known): POZ 10000 47643		
DIRD:	The date dissolution was authorized: 34000 30 - 2008		
	Effective date of dissolution if applicable: Junio 30 - 2008 (so more than 90 days after dissolution like date)		
OURTH:	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 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		
	(voling group)		
,	(voling group) OF STATE OF STATE		
;	Signature: Madelicedo		
	(By a director, provident or other afficer - if directors or officers have not been selected, by		

(Typed or printed name of person signing)

President
(Filled of porson steader)

un irrestruction - if in the hands of a receiver, trustee, or other court appointed fiduciary, by

(Linitavi borson algaint)

that fiduciary)

Filing Fee: \$35

H08000162538