Po400073470

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MÁIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
•

Office Use Only



200144153252



02/23/09--01014--001 **35.00

SECRETARY OF STATE

FILED

2 24 09

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Sabine Neurotechnology, Inc.	Dissolution
DOCUMENT NUMBER: P04000073470	
The enclosed Articles of Dissolution and fee are subr	nitted for filing.
Please return all correspondence concerning this matter	er to the following:
Ryan T. Kern, MD	
(Name of Contact Pe	erson)
Synogen, Inc.	
(Firm/Company	y)
101 SE 2nd Place	
(Address)	
Gainesville, FL 32601	<u></u>
(City/State and Zip	Code)
For further information concerning this matter, please	call:
· · · · · · · · · · · · · · · · · · ·	352) 371-2075 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	(
Certificate of Status Certified	nal copy is Certified Copy
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

ARTICLES OF DISSOLUTION

FILED

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Sabine Neurotechnology, Inc. The document number of the corporation (if known): P04000073470 SECOND: The date dissolution was authorized: 02/19/2009 THIRD: Effective date of dissolution if applicable: 02/19/2009 (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 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) (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) Ryan T. Kern, MD (Typed or printed name of person signing) President

Filing Fee: \$35

(Title of person signing)