

P09000095290

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Roberts SEP 21 2010



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 8, 2010

JOHN FRANKUM  
NEURO SERVICES INC  
25 W. AVERY STREET  
PENSACOLA, FL 32501

SUBJECT: NEURO SERVICES INC  
Ref. Number: P09000095290

We have received your document for NEURO SERVICES INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$52.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 510A00021391

## 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:

Neuro Services Inc

SECOND: The document number of the corporation (if known): P09000095290

THIRD: The date dissolution was authorized: 30th August 2010

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 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

\_\_\_\_\_  
(voting group)

Signature: 

(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)

John Frankum

(Typed or printed name of person signing)

President/Secretary

(Title of person signing)

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