

P10000095116

Florida Department of State  
Division of Corporations  
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.**

((H12000095792 3)))



H120000957923ABC2

**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)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : 120000000019  
Phone : (305)552-5973  
Fax Number : (305)220-1440

**DISSOLUTION OR WITHDRAWAL  
AMERICAN THERAPY ASSOCIATION INC**

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

RECEIVED  
12 APR 11 AM 8:04  
TALLAHASSEE, FLORIDA

FILED  
2012 APR 11 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

H12000095792

## 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:  
AMERICAN THERAPY ASSOCIATION INC

SECOND: The document number of the corporation (if known): P10000095116

THIRD: The date dissolution was authorized: 4-9-12

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 by

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

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

2012 APR 11 PM 3:00

FILED

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)

LUIS A GARCIA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

H12000095792