

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

DISSOLUTION OR WITHDRAWAL VICTORIA CHIROPRACTIC CARE, INC.

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ASSIGN OF CORPORATION

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ARTICLES OF DISSOLUTION

Pursuant to articles of c	section 607.1401, Florida Statutes, this Florida profit corporation submits the following lissolution:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	VICTORIA CHIROPRACTIC CARE, INC.
SECOND:	The document number of the corporation (if known); P11000028813
THIRD:	The file date the articles of incorporation: 03/22/2011
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporaton authorized the dissolution.
	A majority of the directors authorized the dissolution.
	,
Signa	ture;
•	(By a director, president or other officer - if directors or officers have not been selected, by un incorporator - if in the hands of a receiver, pushes, or other court appointed fiduciary, by that fichiciary.)
	JOHN RUHSAM
	(Typed or printed name of person signing)
	PRESIDENT (Title of Person, Signing)
	() isto as a countral Principle

Filing Fee: \$35