





CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 229039 8006576

AUTHORIZATION :

COST LIMIT :

*Spudleman*  
\$ 35.00

ORDER DATE : July 24, 2014

ORDER TIME : 10:17 AM

ORDER NO. : 229039-010

CUSTOMER NO: 8006576

DOMESTIC FILINGS

NAME: GREGORY T. CAPRIOTTI, PSY.,  
P.A.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray - EXT# 62925

EXAMINER'S INITIALS: \_\_\_\_\_

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following of dissolution:

FILED  
2014 JUL 31 AM 11:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:  
GREGORY T. CAPRIOTTI, PSY., P.A.

SECOND: The document number of the corporation (if known): P14000045777


THIRD: The date dissolution was authorized: 7/30/2014

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)

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)

Dr. Gregory T. Capriotti  
(Typed or printed name of person signing)

Director  
(Title of person signing)

Filing Fee: \$35