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**To:**

Division of Corporations  
Fax Number : (850)617-6380

**From:**

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**DISSOLUTION OR WITHDRAWAL  
VIDA THERAPY CENTER CORP**

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## 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:  
Vida Therapy Center Corp
- SECOND: The document number of the corporation (if known): P17000008772
- THIRD: The date dissolution was authorized: 5/23/18  
Effective date of dissolution if applicable: 5/23/18  
(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: Dulce M. Gonzalez

(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)

Dulce Gonzalez  
(Typed or printed name of person signing)P  
(Title of person signing)2018 MAY 23 A 10:40  
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