

P93000038874
P.002
Page 1 of 1

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.

((H17000236822 3)))



H170002368223ABC+

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 : BILZIN SUMBERG BAENA PRICE & AXELROE LLP
Account Number : 075350000132
Phone : (305) 374-7580
Fax Number : (305) 351-2122

DISSOLUTION OR WITHDRAWAL

ORTHOPAEDIC AND SPINAL ASSOCIATES OF SOUTH
FLORIDA,

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED
17 SEP - 1 PM 1:02
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

47463
V. Rivero

Electronic Filing Menu

Corporate Filing Menu

Help

SEP 05 2017
C McNAIR

H17000236822 3

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:
ORTHOPAEDIC AND SPINAL ASSOCIATES OF SOUTH FLORIDA, P.A.

SECOND: The document number of the corporation (if known): P93000038874

THIRD: The date dissolution was authorized: August 31, 2017

Effective date of dissolution if applicable:

(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

DAN SCOTT COHEN, M.D.

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)