Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

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DISSOLUTION OR WITHDRAWAL NEURO IMAGING INSTITUTE, INC.

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Corporate Filing Menu

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11/20/2014

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 Neuro Imaging Institute, Inc.	f State:			
SECOND:	The document number of the corporation (if known): P9600005139	9			
THIRD:	The date dissolution was authorized: December 5, 2013				
	Effective date of dissolution if applicable: upon filing	file date)			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for diss	iolutic	חו	
	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)	:	7		
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NGV 20	11, 	
	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				
	John P. Whittington		44		
	(Typed or printed name of person signing)				
	Vice President				
	(Title of person signing)				

Filing Fee: \$35