

P960000088827

Requestor's Name



Berman, Hopkins  
Wright, Arnold  
& LaHam, LLP

CERTIFIED PUBLIC ACCOUNTANTS  
BUSINESS CONSULTANTS  
PROFIT ADVISORS

307 E. NEW HAVEN AVE., SUITE 1  
MELBOURNE, FL 32901-4576

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99 JUN -1 PM 12:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

DISS.

S. PAYNE JUN 8 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 4, 1999

Berman Hopkins Wright & LaHam CPA's, LLP  
307 E. New Haven Avenue, Suite 1  
Melbourne, FL 32901-4576

SUBJECT: SPACE COAST NEUROLOGICAL CLINIC, P.A.  
Ref. Number: P96000088827

We have received your document for SPACE COAST NEUROLOGICAL CLINIC, P.A. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6901.

Susan Payne  
Senior Section Administrator

Letter Number: 799A00023731

\$ 35 -

## ARTICLES OF DISSOLUTION

FILED

99 JUN -1 PM 12:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

FIRST: The name of the corporation is: SPACE COAST NEUROLOGICAL CLINIC, PA,

SECOND: The date dissolution was authorized: 12-31-98

THIRD: 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 vote of 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

Signed this 30 day of April, 19 99

Signature

(By the Chairman or Vice Chairman of the Board, President, or other officer)

JOANNE LINK, MD

(Typed or printed name)

PRESIDENT

(Title)