

11-05-1997 0:42AM

FROM MACLEOD/MCGINNESS, PA 941 954 5974

P.7

P96000100450

11/05/97

FLORIDA DIVISION OF CORPORATIONS
PUBLIC ACCESS SYSTEM
ELECTRONIC FILING COVER SHEET

11:34 AM

(((H97000018396-6)))

TO: DIVISION OF CORPORATIONS

FAX #: (850) 922-4000

FROM: MACLEOD & MCGINNESS

ACCT#: 102223000620

CONTACT: PEGGY HOWSER

PHONE: (941) 954-8788

FAX #: (941) 954-5974

NAME: RISCORP HEALTH PLANS III, INC.

AUDIT NUMBER.....H97000018396

DOC TYPE.....DISSOLUTION

CERT. OF STATUS..0

PAGES..... 1

CERT. COPIES.....1

DEL.METHOD.. FAX

EST.CHARGE.. \$87.50

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX
AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

RECEIVED
90:21 PM 12:06
DIVISION OF CORPORATIONS
97 NOV -5 MON

FILED
97 NOV -5 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/5

Vol. Diss.

FAX AUDIT #H97-18396

**ARTICLES OF DISSOLUTION
OF
RISCORP HEALTH PLANS III, INC.**

Pursuant to Section 607.1403 of the Florida General Corporation Act, the undersigned Corporation adopts the following Articles of Dissolution for the purpose of dissolving the Corporation:

1. The name of the Corporation is RISCORP Health Plans III, Inc.
2. Pursuant to Section 607.0704, Florida Statutes, the Corporation elected to dissolve by written consent of its sole Shareholder, a number sufficient for approval, effective September 24, 1997. Voting by voting groups was not required.

DATED: _____, 1997

RISCORP HEALTH PLANS III, INC.

By: 
William D. Griffin, President

FILED
NOV -5 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Prepared by: Veanna J. McAhren
1800 Second Street, Suite 971
Sarasota, FL 34236
(941) 954-8788

FAX AUDIT #H97-18396