P970000/1560

Palm Beach Phy. Med. - PO Box 210699 Word Palm Bch., H. 33411 City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(C	orporation Name)	(Doc	ument #)
2(C	orporation Name)	(Doc	ument #)
3(C	orporation Name)	(Doc	ument #)
4(C	orporation Name)	(Dec	ument #)
☐ Walk in ☐ Mail out	☐ Pick up time ☐ Will wait	Photocopy	Certified Copy Certificate of Status
NEW FILINGS	AMEND	MENTS	redictory of the control of the cont
Profit	Amendmen		
NonProfit	Resignation	of R.A., Officer/Directo	or
Limited Liability	Change of 1	Registered Agent	-=

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

Domestication

Other

NE

	REGISTRATION/QUALIFICATION
	Foreign
	Limited Partnership
<u> </u>	Reinstatement
	Trademark
	Other

T. LEWIS JUN 2 1 1999

Examiner's Initials	



ARTICLES OF DISSOLUTION

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

FIRST:	The name of the corporation is: PALM BEACH PHYSICAL MEDICINE			
	AND REMABILITATION, INC.			
SECOND:	The date dissolution was authorized: MARCH 31, 1999			
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 . NIA (voting group).				
Sign	ned this 4^{Th} day of $June$, 1999.			
	PACE ID ENT (Corperation Name) By Allegum (Chairman or Vice Chairman of the Board, President, or other officer) A. Ronard Peterson (Typed or printed name) PRESIDENT (Title)			