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08 MAR 24 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

tl 3/24/08



March 21, 2008

State of Florida
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: *National Osteopathic Physicians Purchasing Group, Inc.*
Federal ID No.#65-0789177
Certificate of Dissolution

Dear Sir/Madam:

Enclosed herein are an original and one copy of the Articles of Dissolution regarding the above-referenced company, along with a filing fee of \$35 made payable to the "Florida Department of State". Once this document has been processed in your usual course of business, please return a file copy to me.

If you have any questions or comments, please feel free to contact me at the address above, via telephone at (248) 901-4074, via facsimile at (248) 901-4040 or email at slites@plunkettcooney.com

Thank you.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Scott K. Lites".

Scott K. Lites

SKL:amg
Encl.

Bimfield.14572.74329.970956-1

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:

National Osteopathic Physicians Purchasing Group, Inc.

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

THIRD: The date dissolution was authorized: December 31, 2007

Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file date)

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)

Joseph E. Mattingly

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

FILED
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TALLAHASSEE, FLORIDA