8000005735 Requester's Name FILED -Independent Prosthetics 00 DEC 20 AM 8: 49 TALLAHASSEE, FLORIDA _ 649 West Michigan Sti Ollando, Florida 32805 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) 000003509560 -12/20/00--01099-*****35.00 (Corporation Name) (Document #) ☐ Pick up time **₩** Walk in Certified Copy Photocopy Mail out Will wait Certificate of Status **NEW FILINGS AMENDMENTS** ☐ Profit Amendment ■ Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

Examiner's Initials

The name of the corporation is: <u>Independent Prosthetic Services</u> Inc.

FIRST:

ARTICLES OF DISSOLUTION

FILED

00 DEC 20 AM 8:49

TALLAHASSEE, FLORIDA

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

SECOND: The date dissolution was authorized: 12/18/00	
THIRD: Adoption of Dissolution (CHECK ONE)	
Dissolution was approved by the shareholders. The number of votes was sufficient for approval.	cast for dissolution
Dissolution was approved by vote of the shareholders through voting	groups.
The following statement must be separately provided for each votile entitled to vote separately on the plan to dissolve:	
The number of votes cast for dissolution was sufficient for approval b	ру
william R Janiel	
(voting group)	 .
Signed this day of December,	.2000
lignature	·
(By the Chairman of Vice Chairman of the Board, President, or other officer)	
William R Daniel (Typed or printed name)	
President	
(Affice)	