

P98000012768

Ruth DeBlusk

Requestor's Name

PO Box 4344

Address

Tallahassee, FL 32303

City/State/Zip

Phone #

850-522-3261

Office Use Only

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

1. Integrative Medicine, Inc P98000012768
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time _____

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

99 JAN 26 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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 checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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*****43.75 *****43.75

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

RECEIVED
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DIVISION OF CORPORATION

Examiner's Initials

See 1/26

ARTICLES OF DISSOLUTION

FILED
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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: Integrative medicine, Inc.

SECOND: The date dissolution was authorized: 2/9/98

THIRD: Adoption of Dissolution (CHECK ONE)

Effective date of dissolution was 12/31/98

☒ 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

(voting group)

Signed this 26 day of January, 19 99.

Signature

Ruth M. DeBursk, President
(By the Chairman or Vice Chairman of the Board, President, or other officer)

RUTH M DeBursk
(Typed or printed name)

President

(Title)