

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305) 552-5973  
Fax Number : (305) 220-1440

**DISSOLUTION OR WITHDRAWAL  
DOCTOR'S CHOICE MEDICAL, INC.**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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EXAMINER

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## ARTICLES OF DISSOLUTION

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 as currently filed with the Florida Department of State:  
Doctor's Choice Medical, Inc.
- SECOND: The document number of the corporation (if known): P98000036642
- THIRD: The date dissolution was authorized: 04/23/14  
Effective date of dissolution if applicable: 04/23/14  
(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)

Peter King

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

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