## 561866

COMPRESSION THERAPY, INC. 856 Hammocks Drive Occee, Florida 34761 (407) 291-4960 FAX (407) 291-9758

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Fl. 32314

January 12, 2000

000003101940--9 -01/19/00--01007--008 \*\*\*\*\*35.00 \*\*\*\*\*35.00

To Whom It May Concern:

Enclosed is the completed form for Articles of Dissolution pursuant to section 607.1403 Florida Statutes. The Document# S61866 request dissolution of the corporation as of December 31, 1999.

Sincerely,

James P Gleason

President/Treasurer

125.00 1.25.00 OO JAN 18 AM 9: 49

## 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 is: Compression Therapy Inc.	
Doc	ument# S61866	
SECOND:	The date dissolution was authorized: December 31, 1999	
THIRD:	Adoption of Dissolution (CHECK ONE)	
XXX Diss	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.	
☐ Diss	olution was approved by vote of the shareholders through voting groups.	
	he following statement must be separately provided for each voting group thitled to vote separately on the plan to dissolve:	
The	number of votes cast for dissolution was sufficient for approval by	
<del></del>	(voting group)	
Signed	d this 31 day of December ,19 99  (By the Chairman or Vice Chairman of the Board, President, or other officer)	
James	s P Gleason	
	(Typed or printed name)	
	President/Treasurer (Title)	

Compression Therapy Inc.