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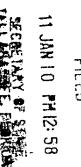
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## CÖVER LETTER

| Division of Corporations  SUBJECT: Articles of Dissolution  DOCUMENT NUMBER: J22210  The enclosed Articles of Dissolution and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Barbara Jacobs @ 7038 Del Corso Lane, Delray Beach, FL 33446 (Name of Contact Person)  Jacobs & Assoc., P.A.  (Firm/Company)  8010 N. University Drive  (Address)  Tamarac, FL 33321  (City/State and Zip Code)  For further information concerning this matter, please call: |
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| (Name of Contact Person)  Jacobs & Assoc., P.A.  (Firm/Company)  8010 N. University Drive  (Address)  Tamarac, FL 33321  (City/State and Zip Code)  |
| (Firm/Company)  8010 N. University Drive  (Address)  Tamarac, FL 33321  (City/State and Zip Code)   |
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| 8010 N. University Drive  (Address)  Tamarac, FL 33321  (City/State and Zip Code)   |
| (Address)  Tamarac, FL 33321  (City/State and Zip Code)   |
| Tamarac, FL 33321 (City/State and Zip Code)   |
| (City/State and Zip Code)   |
| (City/State and Zip Code)   |
| For further information concerning this matter, please call:  |
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| 504   |
| Barbara Jacobs at ( 561 ) 843-0277  |
| (Name of Contact Person) (Area Code & Daytime Telephone Number)   |
| Enclosed is a check for the following amount:   |
| ✓\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee,   |
| Certificate of Status Certified Copy Certificate of Status &  |
| (Additional copy is Certified Copy  |
| enclosed) (Additional copy is enclosed)   |
|   |
| MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section   |
| Division of Corporations Division of Corporations   |
| P.O. Box 6327 Clifton Building  |
| Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301  |

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits th

of dissolution: The name of the corporation as currently filed with the Florida Department FIRST: Jacobs & Assoc., P.A. The document number of the corporation (if known): J22210 SECOND: 9/9/10 The date dissolution was authorized: THIRD: 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) Barbara Jacobs for Michael D. Jacobs (deceased 9/9/10) (Typed or printed name of person signing)

Filing Fee: \$35

Surviving spouse