K22799

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COVER LETTER

TO: Amendment Section

SUBJECT: Ameri-Life & Health Services of Central Florida, Inc. DOCUMENT NUMBER: K22799 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Timothy O. North (Name of Person) Ameri-Life & Health Services of Central Florida, Inc. (Name of Firm/Company) 2536 Countryside Blvd 6th Floor (Address) Clearwater Fl 33763 (City/State/and Zip Code) For further information concerning this matter, please call: Timothy O. North (Name of Person) at (727) 726-0726 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Certificate of Status & Certificate Copy (Additional copy is enclosed) (Additional copy is enclosed)	Division of Corporations				
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MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section					
Division of Corporations Division of Corporations					
P.O. Box 6327 409 E. Gaines Street Tallahassee, Florida 32314 Tallahassee, Florida 32399	P.O. Box 6327 409 E. Gaines Street				

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 as currently filed with the Florida Department of				
	Ameri-Life and Health Services of Central Florid	a, inc.			
SECOND:	The document number of the corporation (if known): K22799				
THIRD:	The date dissolution was authorized: December 31, 2004				
	Effective date of dissolution if applicable: December 31, 2004 (no more than 90 days after dissolution	- Cladas			
FOURTH:		i file date)			
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution			
	Dissolution was approved by of the shareholders through voting groups.				
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	entitled			
	The number of votes cast for dissolution was sufficient for approval by	05 APR SECRET TALLAH			
		22 \AR\ \SS(\)			
	(voting group) Signed this 31 day of DECEMBER 2004,	05 APR 22 PH I2: 39 SECRETARY OF STATE LLAHASSEE. FLORID			
	Signature: (By a director, president of other officer - if directors or officers have not been selected, by	DA DA			
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)				
	Timothy O North				
	(Typed or printed name of person signing)				
	President/Director				
	(Title of person signing)				

Filing Fee: \$35