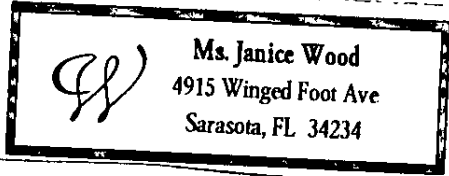


L 66843



(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

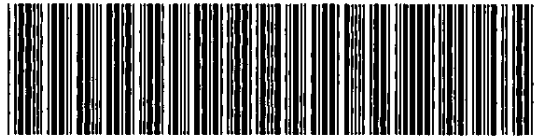
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 MAY 24 AM 8:03
SECRETARY OF STATE
TALLAHASSEE, FL 32310

Volam.
Diss.

DC

DC MAY 25 2010



FLORIDA DEPARTMENT OF STATE
Division of Corporations

5/20/10

May 13, 2010

MS. JANICE WOOD
4915 WINGED FOOT AVE.
SARASOTA, FL 34234

SUBJECT: WOODLEAF, INC.
Ref. Number: L66843

*Ny 24/7 Phone
number: 941-351-7242*

So sorry for the inconvenience.

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE THE DATE THE DISSOLUTION WAS AUTHORIZED.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Barlene Connell
Regulatory Specialist II

Letter Number: 510A00012061

RECEIVED
MAY 24 AM
TALLAHASSEE
REGULATORY DIVISION

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 State:

WOODLEAF, INC.

SECOND: The document number of the corporation (if known): L66843

THIRD: The date dissolution was authorized: FEBRUARY 24th 10, 2010

Effective date of dissolution if applicable: MARCH 10, 2010
(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:

JANICE M. WOOD, President/owner

(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)

JANICE M. WOOD

(Typed or printed name of person signing)

OWNER / PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED
10 MAY 24 AM 8:07
SECRETARY OF STATE
TALLAHASSEE, FL 32399