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TO: Amendment Section

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

Division of Corporations SUBJECT: Viewpoints Alliance, Inc. DOCUMENT NUMBER: N02000008139 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wendy J. Segade (Name of Person) Viewpoints Alliance, Inc. (Name of Firm/Company) P.O. Box 343 (Address) Safety Harbor, FL 34695 (City/State/and Zip Code) For further information concerning this matter, please call: Wendy J. Segade (Name of Person) Enclosed is a check for the following amount: ☑ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: MAILING ADDRESS: Amendment Section Amendment Section

Division of Corporations

Tallahassee, Florida 32399

409 E. Gaines Street

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Viewpoints Alliance, Inc.
SECOND:	The document number of the corporation (if known): N02000008139
THIRD:	The file date of the articles of incorporation: 10/23/2002
FOURTH	The corporation has not commenced to conduct its affairs.
FIFTH:	No debts of the corporation remains unpaid.
SIXTH:	Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)
	☐ The dissolution was authorized by a majority of the directors: OR
	☑ The dissolution was authorized by an incorporator.
	☐ The dissolution was authorized by a majority of the incorporators.
	Signed this 31 day of March, 2004.
Sign	vature: Wendy Aggade, Pasdent
	(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Wendy J. Segade
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35