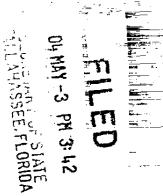
P01000053050

(Address)
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PICK-UP WAIT MAIL
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TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: ORQUIDEA VENUS, INC.
DOCUMENT NUMBER: P01000053050
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CLARA TELLO
(Name of Person)
N/A
(Name of Firm/Company)
16171 BLATT BLVD. UNIT #302
(Address)
WESTON, FL 88826
(City/State/and Zip Code)
For further information concerning this matter, please call:
CLARA TELLO at (954) 661-3113
(Name of Person) (Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
S35 Filing Fee S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 STREET ADDRESS: Amendment Section Division of Corporations Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

Pursuant to a of dissolution	
FIRST:	The name of the corporation as currently filed with the Department of State
	ORQUIDEA VENUS, INC.
SECOND:	The document number of the corporation (if known): P01000053050
THIRD:	The date dissolution was authorized: APRIL 30, 2004
	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 of 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)
	Signed this 30th day of APRIL 2004
Signat	ure: Delivereco.
	(By a director, president or other officer - if directors or officers have not been selected, by an i recorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	JULIO C. RUBIANO
	(Typed or printed name of person signing)
	DIRECTOR/PRESIDENT
	(Title of person signing)

Filing Fee: \$35