POGANSHITA LETER 50040

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee. FL 32314

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SUBJECT: Castella Physical Heraphy
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
S70,00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S 1.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Cop & Certificate Status	
Dissolution		ADDITIONAL COR		D
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NOTE: Please provide the original and one copy of the articles.

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STATE OF FLORIDA DEPARTMENT OF THE SECRETARY OF STATE ARTICLES OF DISSOLUTION PRIOR TO ISSUANCE OF SHARE

Pursuant to 607.1401 of the General Statutes of Florida (state), the undersigned corporation hereby submits the following Articles of Dissolution for the purpose of dissolving the corporation:

- 1. The name of the corporation is **CASTELLA PHYSICAL THERAPHY & MEDICAL CENTER, INC.**
- 2. The names, titles and addresses of the officers, if any, of the corporation are: 1) Andy Castella
- 3. The names and addresses of the directors or, if none, of the incorporators of the corporation are:
- 1) Andy Castella
- 4. The corporation was incorporated on the 31st day of May, 2001
 - 5. None of the corporation's shares have been issued.
 - 6. No debt of the corporation remains unpaid.
 - 7. The dissolution has been authorized by a majority of the directors or incorporators listed in Item 3 above.
 - 8. These articles will be effective upon filing. This the 13th day of June, 2001.

President - Andy Castella