P01000066317

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer: Alexandra authorized to correct date authorized.			

Office Use Only



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12/20/04--01016--020 **43.75

EFFECTIVE DATE

Voldis AFT 12 30-04 2004 DEC 20 AM 9: 46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

USA FLORIDA GROUP, INC. P.O.BOX 101022 CAPE CORAL, FL 33910

PHONE (voice): 443-342-2337

FAX: 309-285-4110

Please find enclosed check of the amount of \$43.75 (= dissolution fee plus fee for certified copie)

Thank you.

Sincerely,

USA FLORIDA GROUP, INC.

ARTICLES OF DISSOLUTION

FILED

2004 DEC 20 AM 9: 46

FIRST:	The name of the corporation is: USA FLORIDA GROUP, INC.		
	• • • • • • • • • • • • • • • • • • • •		
SECOND:	The date dissolution was authorized: 12-18-04 Effective	12-31-04	
THIRD:	Adoption of Dissolution (CHECK ONE)		
	solution was approved by the shareholders. The number of votes sufficient for approval.	cast for dissolution	
Dis Dis	solution was approved by vote of the shareholders through voting	groups.	
	The following statement must be separately provided for each voting the following statement must be separately on the plan to dissolve:	ng group	
The	number of votes cast for dissolution was sufficient for approval b	y	
	(voting group)		
Si	gned this 18 day of December	2004	
Signature _	(By the Chairman or Vice Chairman of the Board, President, or other officer)		
	Alexandra Fischer (Typed or printed name)		
	(15)ped of printed name)		
	President		
	(Title)		