

PO1000075749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

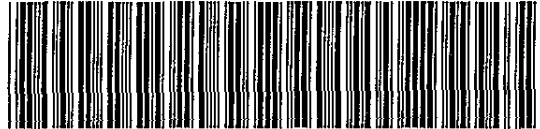
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FILED
03 APR 17 PM 4:01
TALLAHASSEE, FLORIDA

MEDICA, INC.

13651 Hwy 87N
Jay, FL 32565
(850)675-0528
EIN#593735594

April 1, 2003

Division of Corporations
Attn: Amendment Section
P.O. Box 6327
Tallahassee, FL 32314

FILED
03 APR 17 PM 4:01
CLERK OF STATE
TALLAHASSEE, FLORIDA

To Whom It May Concern:

I have enclosed the Articles of Dissolution for Medica, Inc. Medica's last day of business was October 1, 2002. We are now ready to dissolve the corporation. Also enclosed, is a check for \$43.75, which is meant to cover the cost of the filing fee and (1) certified copy of the dissolution status certificate. Our address and telephone number is listed above. Please contact us if needed for any further information.

Sincerely,

Sarai Ellis, President/CEO

Sarai Ellis, President/CEO
Medica, Inc.

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED
03 APR 17 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is: Medica, Inc.

SECOND: The date dissolution was authorized: 4-1-2003

THIRD: 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 vote 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

Sarai Ellis - sole shareholder/owner
(voting group)

Signed this 1st day of April, 2003.

Signature

Sarai Ellis, CEO, president
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Sarai Ellis
(Typed or printed name)

CEO, president
(Title)