Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0380

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

DISSOLUTION

HEALTH & LIFE MEDICAL CARD INC.

| 0 | Certificate of Status |
|-------|-----------------------|
| 0 | Certified Copy |
| 02 | Page Count |
| 35.00 | Estimated Charge |
| , | Somaced Charge |

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ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST: | The name of the corporation as currently filed with Department of State: |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Health & Life Medical CARD Inc. |
| SECOND: | The document number of the corporation (if known): PD2000035892 |
| THIRD: | The file date of the articles of incorporation was: 04 02 2002 |
| FOURTH: | (CHECK AT LEAST ONE BOX) |
| | (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. The corporation has not commenced business. No debt of the corporation remains unpaid. |
| | The corporation has not commenced business. |
| fifth: | No debt of the corporation remains unpaid. |
| SIXTH: | The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. |
| SEVENTH: | Adoption of Dissolution (CHECK ONE) |
| | A majority of the incorporators authorized the dissolution. |
| | A majority of the directors authorized the dissolution. |
| ; | Signed this 27th day of December . 2004. |
| | 17/2 |
| Signatur | (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - |
| | if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) |
| | Lyis Del Pino (Typed or printed name of nerson signing) |
| | California de las mismos mensos de Transport aribitatibili |
| | President (Title of person signing) |
| | |

Filing Fee: \$35

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