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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : GOZA AND HALL, P.A.

Account Number : 12000000006 Phone : (727)799-2625

: (727) 796-8908 Fax Number

DISSOLUTION OR WITHDRAWAL **GULF MEDICAL FIBEROPTICS, INC.**

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ARTICLES OF DISSOLUTION

- 1. The name of the corporation is GULF MEDICAL FIBEROPTICS, INC.
- 2. The names and respective addresses of its officers are:

Patrick Bennetts – 1583 Santa Barbara Drive, Dunedin, FL 34698 Christopher Kerns – 739 6th Street South, Safety Harbor, FL 34695

3. The names and respective addresses of its directors are:

Patrick Bennetts – 1583 Santa Barbara Drive, Dunedin, FL 34698 Christopher Kerns – 739 6th Street South, Safety Harbor, FL 34695

- 4. All debts, obligations and liabilities of the corporation have been paid or discharged or adequate provision has been made therefor.
- 5. All the remaining property and assets of the corporation have been distributed among its shareholders in accordance with their respective rights and interests.
 - 6. There are no actions pending against the corporation in any court.
- 7. A copy of the resolution to dissolve is on file in the corporate minute book. That resolution to dissolve was authorized and adopted by all of the directors and a majority of the shareholders of the corporation on the 28th day of December, 2011, which was sufficient for approval.

DATED this 28th day of December, 2011.

Patrick Bennetts - President

STATE OF FLORIDA

COUNTY OF PINELLAS

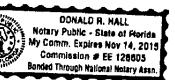
BEFORE ME personally appeared PATRICK BENNETTS, President of GULF MEDICAL FIBEROPTICS, INC. and he acknowledged before me that he executed the foregoing Articles of Dissolution.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this 28th day of

December, 2011.

Notary Public

My Commission Expires:



Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.
This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation: GULF MEDICAL FIBEROPTICS, INC.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
Date, Amount and Description of Services Rendered and/or goods provided
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
448 Commerce Blvd.
Oldsmar, FL 34677
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence within 4 years after the filing of this notice.
Patrick Bennetts, President Jatul Suell
Printed Name of the Person Filing Signature of the Person Filing