| POLODOI | 05469 |
|---|---|
| (Requestor's Name) (Address) (Address) | 600081384006 |
| (City/State/Zip/Phone #) PICK-UP (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: Special Instructions to Filing Officer: Office Use Only | 11/07/0601032012 **35.00 GEORGY - 7 AM11:49 FILD AMASSEE, FLORIDA |
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KUTAK ROCK LLP

THE OMAHA BUILDING 1650 FARNAM STREET

OMAHA, NEBRASKA 68102-2186

402-346-6000 Facsimile 402-346-1148

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ATLANTA CHICAGO DENVER DES MOINES FAYETTEVILLE IRVINE KANSAS CITY LITTLE ROCK LOS ANGELES OKLAHOMA CITY RICHMOND SCOTTSDALE WASHINGTON WICHITA

PAMELA S. FLINT pamela.flint@kutak rock.com 402-346-6000

November 6, 2006

VIA FEDEX

Florida Department of State Division of Corporations Amendment Section Clifton Building 2661 Executive Center Circle Tallahassee, FL

Re: A1 SCRUBS, INC.

Dear Sir/Madam:

Enclosed for filing please find Articles of Dissolution for the above referenced. Also enclosed is our firm check in the amount of \$35.00 to cover the filing fee.

Please return the acknowledgement of filing to my attention. I have enclosed a prepaid, self-addressed FedEx envelope for your convenience in returning the acknowledgement. We appreciate your assistance in filing this document.

If you have any questions regarding this request or need any additional information, please give me a call. Thank you.

Sincerely,

Pamela 3.7 Curt

Pamela S. Flint Paralegal

psf

Enclosures

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: A1 SCRUBS, INC.

DOCUMENT NUMBER: P02000105469

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

| Pamela S. Flint, Paralegal | |
|---|--|
| (Name of Cor | tact Person) |
| Kutak Rock LLP | |
| (Firm/C | ompany) |
| 1650 Farnam Street | |
| (Addre | ess) |
| Omaha, NE 68102 | |
| (City/State a | nd Zip Code) |
| For further information concerning this matter, | please call: |
| Pamela S. Flint (Name of Contact Person) | at (<u>402</u>) <u>346-6000</u> (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: | (Area Code & Daytime Telephone Number) |
| Certificate of Status (A | \$43.75 Filing Fee & \$\$52.50 Filing Fee,Certified CopyCertificate of Status &Additional copy isCertified Copyenclosed)(Additional copy is enclosed) |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

| | FILED |
|----------------------------|--|
| · • | 06 NOV -7 AMII: 50 ARTICLES OF DISSOLUTION |
| Pursuant to of dissolut | o section 607.1403, Florida Statutes, this Florida profit corporation submits the role in articles ion: |
| FIRST: | The name of the corporation as currently filed with the Florida Department of State: |
| | A1 SCRUBS, INC. |
| SECOND: | The document number of the corporation (if known): P02000105469 |
| THIRD: | The date dissolution was authorized: October 10, 2006 |
| | Effective date of dissolution <u>if applicable:</u> (no more than 90 days after dissolution file date) |
| FOURTH: | 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 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 |
| , | |
| | (voting group) |
| | Signature: (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, or other court appointed fiduciary, by that fiduciary) Robert P. Beermann Jr. |
| | (Typed or printed name of person signing) |
| | President and Director |
| | (Title of person signing) |

Filing Fee: \$35

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