## P03000003667

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	·
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Coples	Certifica <u>t</u> es	of Status
Special Instructions to Filing Officer:		

Office Use Only



800014918468

01/01/03--01083--03 \*\*35.00

03 APR-1 PH 4: 01

## My Corporation.com\*

30141 Agoura Road, Suite 205 Agoura Hills, California 91301 U.S. Toll-Free: 888.692.6771 Direct: 818.879.9079 FAX: 818.879.8005 Email: info@MyCorporation.com URL: http://www.mycorporation.com

March 20, 2003

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Selective Sourcing Healthcare Services, Inc.

Ladies and Gentlemen:

Please find enclosed for filing two copies of the Article of Dissolution for Selective Sourcing Healthcare Services, Inc.

Also enclosed is a check in the amount of \$35 as the appropriate filing fee.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,

Ronna Loprete 2530 Meridian Parkway 2<sup>nd</sup> Floor

Durham, North Carolina 27713

## 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 is Selective Sourcing Healthcare Services, Inc		
SECOND:	The filing date of the articles of incorporation was January 9, 2003.		
THIRD: (CH	ECK ONE)		
	None of the corporation's shares have been issued.		
	X The corporation has not commenced business.		
FOURTH:	No debt of the corporation remains unpaid.		
FIFTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.		
SIXTH:	Adoption of Dissolution (check one)		
	A majority of the incorporators authorized the dissolution.		
	X A majority of the directors authorized the dissolution.		
	Signed this 24 day of March, 2003.		
Sign	Ronald Loprete, Director		
Sign	(Typed or Printed Name and Title)  ature RCCMLtc		
	Ronna Loprete, Director (Typed or Printed Name and Title)		

3 APR - I PH 4: 01
ECRETARY OF STATE

FILED