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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CORPORATE DISSOLUTION
DOCUMENT NUMBER: <u>PO30000 10 800</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
TOORIS ROORIGUEZ (Name of Contact Person)
(Name of Contact Person)
ILORIS FITNESS, INC. OBA LADIES WORKOUT EXPRESS (Firm/Company)
13208 5W 42 5T (Address)
OAUIP, FL 33330 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
TDORIS ROORIGUEZ at (954) 472-8660 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF DISSOLUTION Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation subfill the p of dissolution: TALLAHASSEE STATE

The name of the corporation as currently filed with the Florida Department of State ORIDA FIRST: ILDRIS FITNESS, INC. The document number of the corporation (if known): P03000010800 SECOND: The date dissolution was authorized: 3/20/07 THIRD: 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

(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)

TDORIS KOORIGUEZ

(Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35