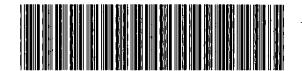
P630000 32180

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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TO: Amendment Section

Division of Corporations	
SUBJECT: Staff Management Solutions I	/ Inc
DOCUMENT NUMBER: P03000032180	
The enclosed Articles of Dissolution and fee are subm	nitted for filing.
Please return all correspondence concerning this matte	er to the following:
Karen Alston	
(Name of Contact Per	rson)
Staff Management Solutions IV Inc	·
(Firm/Company	')
1911 US Hwy 301 N Suite 450	
(Address)	
Tampa, FL 33619	
(City/State and Zip	Code)
For further information concerning this matter, please	call:
Karen Alston at (813 246-5657
	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certified	nal copy is Certified Copy
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

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:					
	Staff Management Solutions IV Inc					
SECOND:	The document number of the corporation (if known): P03000032180					
THIRD:	The date dissolution was authorized: 1/14/2008					
	Effective date of dissolution if applicable: 12/31/2007 (no more than 90 days after dissolution	ı file date)				
FOURTH:	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for diss	olution	1		
	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					
		TAL 38	80			
	(voting group)	CRETARY OF S LAHASSEE, FL	MAY - 1 PH 3:			
	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, trustee, or other court appointed fiduciary, by that fiduciary)	STATE LORIDA	3: 28			
	Steven Harper					
	(Typed or printed name of person signing)					
	Director/President					
	(Title of person signing)					

Filing Fee: \$35