7530000 79798

(Requestor's Name) (Address) (Address)	100088421471
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	02/16/07-01018-001 **35.00 O7 FEB 16 AM II: 08 SECHE (ARY OF STATE TALLAHASSEE, FLORIDA
Office Use Only	$X \rightarrow Y \rightarrow Y$

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Cancerhope Treatment Centers Inc.
DOCUMENT NUMBER: <u>903000079798</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Eric C. Rost
(Name of Contact Person)
(Firm/Company)
3491-11 Thomas VilleRol Suita 401 (Address)
Tallahassee, F1 32309 (City/State and Zip Code)
For further information concerning this matter, please call:
Eric C. Rost at (850) 339-593a (Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

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 as currently filed with the Florida Department of State:
	Concernope Treatment Centers Inc
SECOND:	The document number of the corporation (if known): P0300007979
THIRD:	The file date of the articles of incorporation: 7/21/2003
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A prajority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: (By a director, president of 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.)
	Eric CRost (Typed or printed name of person signing)
	President (Title of Person Signing)

Filing Fee: \$35

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: Cancerhope Treatment Centers 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:
LONE HAPP
SSE 6
TOTAL OS
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Smith, Brooks + Masterson
2629 Mitchum Drive
Smith, Brooks + Masters an 2629 Mitchum Drive Tallahassee, F1 30308
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00