

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:
ACCOUNT RECEIVABLE MANAGEMENT OF FLORIDA, INC.

SECOND: The document number of the corporation: P03000081603

THIRD: The date dissolution was authorized: October 14, 2011
Effective date of dissolution: November 8, 2011

FOURTH: Dissolution was approved by the shareholders through voting groups.
The number of votes cast for dissolution was sufficient for approval by
DARLENE GRAHAM

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: DARLENE GRAHAM CEO
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

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.

Name of Corporation:

ACCOUNT RECEIVABLE MANAGEMENT OF FLORIDA, 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:

THE COMPANY IS INSOLVENT, THERE ARE NOT ASSETS.

Mailing address where claims can be sent:

1834 DEBUTANTE DR
JACKSONVILLE, FL 32246

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.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: DARLENE GRAHAM

Electronic Signature of the Person Filing