P03000102205

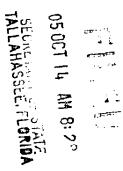
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COVER LETTER

Division of Corpora	
SUBJECT:	Diabetes Specialist Center, Inc
DOCUMENT NUMBER: _	P0300102205
The enclosed Articles of Disso	olution and fee are submitted for filing.
Please return all correspondence	ce concerning this matter to the following:
Leith	Palagye (Name of Contact Person)
Diaba	etes Specialist Center, Inc. (Firm/Company)
236	La Puerfa Way (Address)
Palm	(Address) Beach, Fl. 33480 (City/State and Zip Code)
For further information concer	
Kesh Palagye (Name of Contact Po	at (561) 512 · 580] erson) (Area Code & Daytime Telephone Number)
Enclosed is a check for the foll	owing amount:
	iling Fee & S43.75 Filing Fee & S52.50 Filing Fee, e of Status Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporation P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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:
	Diabetes Specialist Center, Inc.
SECOND:	The document number of the corporation (if known): PO3000102205
THIRD:	The file date the articles of incorporation: FDT. 17, 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 majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Signa	(By a director, president of other officer if directors or differs have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) (Typed or printed name of person signing) (Title of Person Signing)

Filing Fee: \$35