P03000119338

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Vida Medical Center, Inc.
DOCUMENT NUMBER: PD3 000 119338
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Le lizabeth Person)
Name of Firm/Company)
201 S. Biscanne Blud. #1500
(City/State/and Zip Code)
(City/State/and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (305) 358-Le300 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 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 6327409 E. Gaines StreetTallahassee, Florida 32314Tallahassee, Florida 32399

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 Department of State:	
_	Vida Medical Center, Inc.	
SECOND:	The document number of the corporation (if known): P0300011933 8	
THIRD:	The file date of the articles of incorporation was: 10/24/2003	
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.	
	Signed this St. day of February, 2005.	
Signatı	(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.)	
	CARLOS E GONZA 22 (Typed or printed name of person signing)	
	The sidente (Title of person signing)	

Filing Fee: \$35