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COVÉR LETTER

TO: Amendment Section

· Division of Corporations	
SUBJECT: Discolution	n of Conjuny
DOCUMENT NUMBER: PO 40	100176208
The enclosed Articles of Dissolution and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Robert	ontact Person)
(Name of C	Company)
050 S.	Pine Island Pd dress) From Fl 33324
Planta	non Fl 33324
	and Zip Code)
For further information concerning this matter	er, please call:
(Name of Contact Person)	at (Asy) 472 4003 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	t:
	2 \$43.75 Filing Fee &
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 607.1401, 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:		
·*;	Approved Florida healty; Inc.		
SECOND:	The document number of the corporation (if known): Po 4 500 174 208		
THIRD: The file date the articles of incorporation: 9.29.04			
FOURTH:	(CHECK AT LEAST ONE BOX)		
,	None of the corporation's shares have been issued.		
er de fo	☐ 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	ature:		
(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.)			
	Robert J. Santor		
(Typed or printed name of person signing)			
President			
(Title of Person Signing)			

Filing Fee: \$35