(Re	equestor's Name)					
(Ad	ldress)					
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(Cit	ty/State/Zip/Phon	e #)				
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COVER LETTER

· TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations							
SUBJECT: Dissolution of one source to your Home							
DOCUMENT NUMBER: 0050000000000000000000000000000000000							
The enclosed Articles of Dissolution and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
(Name of Contact Person)							
One Souly to Houston inc. (Firm/Company)							
8194 Pine corroad (Address)							
Wellington Florida 33414 (City/State and Zip Code)							
For further information concerning this matter, please call:							
(Name of Contact Person) at (S61) 676/023 (Area Code & Daytime Telephone Number)							
Enclosed is a check for the following amount:							
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) \$\bigcup \\$35 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)							
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton 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 co				. 1		
	ONe	Soula					
SECOND:	The document num The file date of the	ber of the corporat	ion (if kno	wn): P	0500	202300	
THIRD:	The file date of the	articles of incorpo	ration:	05	2002	_	
FOURTH:	(CHECK AT LEA					ALL SEC	
	None of	the corporation's sh	nares have	been issu	ed.	NETAR AHASS	
	The corp	oration has not cor	nmenced b	usiness.		是是	
FIFTH:	No debt of the corp	oration remains un	paid.			LORIE CORIE	
SIXTH:	The net assets of the to the shareholders,			winding ι	ip have bee	n distributed	
SEVENTH:	Adoption of Di	ssolution (CHECI	(ONE)				
	A major	ity of the incorpora	itors autho	rized the	dissolution.		
A majority of the directors authorized the dissolution.							
Sign	ature: (By a director, presint the hands of a re-	dent or other officer - if deciver, trustee, or other co	irectors or off	icers have no fiduciary, by	ot been selected that fiduciary.	l, by an incorporator - if	
		Andrew	5. B	ecke/			
(Typed or printed name of person signing)							
les.den							
		(Title)	of Person Sign	ing i			

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. One Source for your Home 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: . Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 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