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COVER LETTER

Division of Corporations	
SUBJECT: Articles of Di	ssolution
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Charlese M. (Name of Contac	Oribe (Person)
Florida Pet (Firm/Comp	Taxi. Doc.
21431 NW 3rd (Address)	St.
Pembroke Pine (City/State and 2	0, FL 33029 Zip Code)
For further information concerning this matter, ple Charlese Orche, V.P. (Name of Contact Person)	ease call: 786 285 - 4780 t (954) 445-9615 (Area Code & Daytime Telephone Number)
	.75 Filing Fee & \$\sum \\$52.50 Filing Fee, ified Copy Certificate of Status & Certified Copy (Additional copy is enclosed)
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 607.1403, 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: Florida Pet Taxi Dnc.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: 01-08-2006
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	Dissolution was approved by of the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by Taine E. Uribe + Charlese M. Uribe (voting group)
	Signature: (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) (Typed or printed name of person signing) (Typed or printed name of person signing)
	(Title of person signing)

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.
Name of Corporation: Florida Pet Taxi, Onc.
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)
21431 NW 3rd St.
Pembroke Pines, FL 33029
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.
Jame Vibe v.P. Jaine Vibe v.D.
Charlese m Uribe, P Charlese m Vaho, A
Printed Name of the Person Filing Signature of the Person Filing