P05000041530

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03/20/06--01102--016 **43.75

EFFECTIVE DATE

3/31/06



Voldis W/notice

18
3/28

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISSOLVTION O	f CORPORATION
DOCUMENT NUMBER: P05000	0041530
The enclosed Articles of Dissolution and fee are so	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
DR. KRISTINA N	Person)
The Old and	reisony
The PHOENIX force (Firm/Comp	any)
13 NE 17#	PL
(Address)	
CAPE CORAL	FL 33909-2787
(City/State and Z	ip Code)
For further information concerning this matter, plea	ase call:
DR KRISTINA MING at (Name of Contact Person)	(239) 574-7917
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Addi	75 Filing Fee & \$\Bigcup \$\$52.50 Filing Fee, fied Copy
MAILING ADDRESS:	STREET ADDRESS: Amendment Section
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building

Tallahassee, FL 32314

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: THE PHOENIX FORCE, INC. The document number of the corporation (if known): P 05000041530 The date dissolution was authorized: MARCH 1, 2006			
SECOND:	The document number of the corporation (if known): P 05000041530			
THIRD:	The date dissolution was authorized: MARCH 1, 2006			
	Effective date of dissolution if applicable: MARCH 31, 2006 (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 3-(3-06) (voting group)				
				Signature: (By a director, president or other efficer - 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)
				DR. KRISTINA MING METTEN
				(Typed or printed name of person signing) PRESIDENT
	(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:

THE PHOENIX FORCE, 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:

CLAIMS MUST SHOW PROOF OF APPROVAL

BY BOARD MEMBERS FOR AUTHORIZATION

AS REQUIRED BY THE BY LAWS.

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.

DR. KRISTINA MINE METTEN & Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35,00