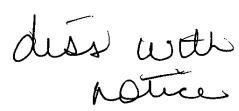
P09000034884

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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11/02/09--01054--001 **35.00

FILED
2009 NOV -2 PH 4: 32
SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE

ADQ 11/4/09

COVER LETTER

TO: Amendment Section

Division of Corporations							
SUBJECT: PRO TREATMENT EN	SUBJECT: PRO TREATMENT ENTERPRISES INC.						
DOCUMENT NUMBER: P06000034	DOCUMENT NÜMBER: P06000034884						
The enclosed Articles of Dissolution and fee	The enclosed Articles of Dissolution and fee are submitted for filing.						
Please return all correspondence concerning	Please return all correspondence concerning this matter to the following:						
LAURALEE CONKLIN AND A							
(Name of Co	ontact Person)						
(Firm/	Company)						
18175 MASON SMITH RD.							
	(Address)						
BROOKSVILLE, FL. 34604							
(City/State and Zip Code)							
For further information concerning this matter, please call:							
<u>.</u>							
LAURALEE CONKLIN OF	Zat (727) 859-2043 (
(Name of Contact Person)	(Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount	:						
Certificate of Status	\$43.75 Filing Fee & \$\Bigsquare \\$52.50 Filing Fee, Certified Copy (Additional copy is Certified Copy						
	enclosed) (Additional copy is enclosed)						
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building						
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301						

ARTICLES OF DISSOLUTION FILED

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following of dissolution: 2009 NOV -2 PM 4: 32						
FIRST: The name of the corporation as currently filed with the Florida Department Btate	SECRETARY OF STATE THE name of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation as currently filed with the Florida Department of the corporation of the corp					
PRO TREATMENT ENTERPRISES INC.	PRO TREATMENT ENTERPRISES INC.					
SECOND: The document number of the corporation (if known): P06000034884						
THIRD: The date dissolution was authorized: 03/24/2008						
Effective date of dissolution if applicable: 08/21/2009						
FOURTH: Adoption of Dissolution (CHECK ONE)						
Dissolution was approved by the shareholders. The number of votes cast for diswas sufficient for approval.	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.					
Dissolution was approved by the shareholders through voting groups.	Dissolution was approved by 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 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					
The number of votes cast for dissolution was sufficient for approval by						
LAURALEE CONKLIN AND/OR BOGDAN WANDACHOWIC (voting group)	Z					
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)						
LAURALEE CONKLIN, PRES (Typed or printed name of person signing)						
PRESIDENT (Title of person signing)						

Filing Fee: \$35

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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 Corpor	ration: PRO TREA	TMENT ENTERP	RISES INC.			
		ion will be the date the d Articles of Dissolution.	issolution is filed with the	Department of State or as			
	Description of information that must be included in a claim:						
	Please be	advised that the	corporation know	wn as Pro Treatment	Enterprises Inc		
/	Doing busin	ess at 18175 Masc	n Smith Rd. Brooks	ville, will be dissolved by	Mutual consent		
1	of Lauralee	Condin, Pres		. for reason of _			
All debts to the corporation & all claims against the corporation will be recieved by the address set forti							
9/21/2009Please see below for Address Correction-							
δf	Mailing address	where claims can be ser	·	to the Division of Corporations)	ı		
0	L ₁	BROOKSVILLE	, FL. 34604				
d, C	ress !	34604					
		the above named corpor after the filing of this not		s a proceeding to enforce the cla	im is commenced		
	Lauralee (Conklin, Presider Printed Name of the Person		Signature of the Person F	liling		

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00