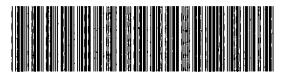
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution of Corporation		
DOCUMENT NUMBER: P06000114755		
The enclosed Articles of Dissolution and f	ee are submitted for filing.	
Please return all correspondence concerning this matter to the following:		
Wilson Cedeno	`	
(Name of	Contact Person)	
Master Dental Models, Inc.		
(Firm/Company)		
10429 South 228 Lane		
(Address)		
Boca Raton, Florida, 33428		
(City/Sta	te and Zip Code)	
For further information concerning this matter, please call:		
Wilson Cedeno	at (_561) 929-6979	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	nť:	
☐\$35 Filling Fee	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF DISSOLUTION

FILEU

2008 JUN 11 PH 3: 25

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:	
	Master Dental Models, Inc.	
SECOND:	The document number of the corporation (if known): P06000114755	
THIRD:	The file date of the articles of incorporation: 09/06/2006	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	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.	
Sign	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.)	
•	Wilson Cedeno	
	(Typed or printed name of person signing)	
	President	
	(Title of Person Signing)	

Filing Fee: \$35