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(Requestor's Name) (Address) (Address)	000128481800
(City/State/Zip/Phone #)	05/05/0801057002 ** 35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	08 MAY -S AN 9: LT
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COVER LETTER

• TO: Amendment Section Division of Corporations

Dissolution of Coorporation SUBJECT:

DOCUMENT NUMBER:

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ealith Edwards	
(Name of Contact Person)	
Eve Healthcare Services, Inc.	
(Firm/Company)	
2361 NW 63rd Avenue	
(Address)	
Surrise, FZ 33313	
(City/State and Zip Code)	

For further information concerning this matter, please call:

at (954) 732 - 5673 (Area Code & Daytime Telephone Number) Edith Folwards (Name of Contact Person)

Enclosed is a check for the following amount:

\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Statu

_____\$43.75 Filing Fee a Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, 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 607.1401, 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:

Eve Healthcare Services, Inc.

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271

SECOND: The document number of the corporation (if known): P0700058704

THIRD: The file date of the articles of incorporation: _

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.

Signature:

(By a diffector, 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)

TRESID

Title of Person Signing)

Filing Fee: \$35