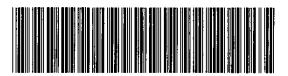
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SECRETARY OF STATE
ANASSEE FLORID

Dissolution

TB 4-16-08

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations
SUBJECT: Dissolution of Corporation.
DOCUMENT NUMBER: P07000101144
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Renay Proenza (Name of Contact Person)
Pro-Trust Services Inc. (Firm/Company)
(Firm/Company)
(Address) Suite 101
Debary, FL 32713 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Renay Proenza at (386) 774-0054 X305 (Area Code & Daytime Telephone Number)
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 Status & (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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:
	Medicare Holvantage Insurance Services, Inc.
SECOND:	The document number of the corporation (if known): Po7000101144
THIRD:	The file date of the articles of incorporation: $\frac{9/11/2007}{}$
FOURTH:	(CHECK AT LEAST ONE BOX)
	(CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued.
	The corporation has not commenced business. No debt of the corporation remains unpaid.
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.
Signa	(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, on other court appointed fiduciary, by that fiduciary.) Renay Typed or brinted name of person signing)
	President (Title of Person Signing)

Filing Fee: \$35