P07000/29053

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Dissolution of	Corporation		
DOCUMENT NUMBER: Po 7 000 /2	9053		
The enclosed Articles of Dissolution and fee are s	submitted for filing.		
Please return all correspondence concerning this matter to the following:			
Hillary Leib. (Name of Contac	sohn		
Hillary's Heart, Inc (Firm/Company)			
	rgian Court		
Wellington	FL 33414		
Wellington FL 33414 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of/Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
Certificate of Status Cert (Add	.75 Filing Fee & \$\Bigcup \\$52.50 Filing Fee, ified Copy		
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 607.1403, 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 Hillary's Heart Inc	f State:		
SECOND:	The document number of the corporation (if known): Po7000129	² 053		
THIRD:	The date dissolution was authorized: 12/30//0			
	Effective date of dissolution if applicable:	file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution		
	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 number of votes cast for dissolution was sufficient for approval by				
	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) (Typed or printed name of person signing)	APR -L PH 1:37 ANASSEC FLEREN		
	Owner/President (Title of person signing)			

Filing Fee: \$35