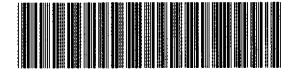
P08000023882

(Requestor's Name)	
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SECRETARY OF STATE



G. Coulliette MAR 2 4 2008

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: AMERICAN Health Institute, INC.
DOCUMENT NUMBER: P0 8 00 00 23 88 Z
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rosa Shaw (Name of Contact Person)
American Health Inchite (Firm/Company)
10138 U.S. Hwy 19 (Address)
Port Richer, Fl. 34668
(City/State and Zip Code)
For further information concerning this matter, please call:
on 727-23 7-6800
Kosa Shaw at (227) 232-017√ (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & \bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy & Certificate of Status & Certified Copy & Certifie
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, 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:	
	A Merican Health Institute	
SECOND:	The document number of the corporation (if known): P08000023882	
THIRD:	The file date of the articles of incorporation: March 5, 2008	
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.	
	A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
	ORID.	
G!	Ros Sans	
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, or other court appointed fiduciary, by that fiduciary.)	
	Rosa Shaw (Typed or printed name of person signing)	
(Typed or printed name of person signing)		
	President.	
	(Title of Person Signing)	

Filing Fee: \$35