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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| SUBJECT: Dissolution of Doctor House USA, Corp. | |
|---|---|
| DOCUMENT NUMBER: P08000060891 | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Ruth Arguello Hipp | |
| (Name of Contact Person) | - |
| (Firm/Company) | |
| 9273 nw 45 st | |
| (Address) | • |
| Sunrise, FL 33351 | ,, |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| Ruth Arguello Hipp at (954) 578-55 | |
| (Name of Contact Person) (Area Code & Daytir | ne Telephone Number) |
| Enclosed is a check for the following amount: | |
| (Additional copy is Cert enclosed) (Add | .50 Filing Fee, ificate of Status & ified Copy ditional copy is closed) |
| MAILING ADDRESS: STREET AD | |
| Amendment Section Amendment Division of Corporations Division of | Section Corporations |

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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 State: |
|---------|---|
| | Doctors House USA, Corp |
| SECOND: | The document number of the corporation (if known): P08000060891 |
| THIRD: | The date dissolution was authorized: 9/27/08 |
| | Effective date of dissolution <u>if applicable:</u> 9/27/08 (no more than 90 days after dissolution file date) |
| FOURTH: | Adoption of Dissolution (CHECK ONE) |
| | Dissolution was approved by the shareholders. The number of votes cast for solution was sufficient for approval. |
| | 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 |
| | (voting group) |
| | Signature: (By addirector, president of 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) |
| | Ruth Arguello Hipp |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of nerves coming) |

Filing Fee: \$35