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TALLAHASSEE, FLORIDA

[Handwritten signature]
8/14/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ANGELFORCE, INC

DOCUMENT NUMBER: NO2000004118

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

Please return all correspondence concerning this matter to the following:

LORRAINE S. WILLIAMS

(Name of Contact Person)

ANGELFORCE, INC.

(Firm/Company)

112 LANE AVENUE SOUTH

(Address)

JACKSONVILLE, FLORIDA 32254

(City/State and Zip Code)

For further information concerning this matter, please call:

LORRAINE S. WILLIAMS

(Name of Contact Person)

at (904) 764-1306

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ANGELFORCE, INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

112 LANE AVENUE SOUTH JACKSONVILLE, FLORIDA 32254
P.O. BOX 77377 JACKSONVILLE, FLORIDA 32226

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

LORRAINE S. WILLIAMS 9245 SPOTTSWOOD ROAD JACKSONVILLE, FLORIDA 32208 PRESIDENT
CONSTANCE FAULK 3968 HUNTERS LANE CIRCLE WEST JACKSONVILLE, FLORIDA 32210 V-PRES.
VERONICA E. WARD 8930 SIBBALD RD. JACKSONVILLE, FLORIDA 32208 SECRETARY
LORRAINE MATHIS 1156 JENNINGS ST. JACKSONVILLE, FLORIDA 32204 ASSISTANT SEC.

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

LORRAINE S. WILLIAMS 9245 SPOTTSWOOD RD. JACKSONVILLE, FLORIDA 32208

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LORRAINE S. WILLIAMS 9245 SPOTTSWOOD ROAD JACKSONVILLE, FLORIDA 32208


Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

08/05/2008

Date



Signature/Incorporator

08/05/2008

Date

ANGEL FORCE INC, PO BOX 77377 JACKSONVILLE, FLORIDA 32254

AFFIDAVIT

08/04/2008

I, LORRAINE WILLIAMS, HAVE NO INTENTION OF REVOKING A
VOLUNTEERING DISSOLUTION FOR ANGEL FORCE INC. AND THE
DOCUMENT # NO2000004118. THEREFORE ONLY RELEASING THE NAME.

LORRAINE S. WILLIAMS PRESIDENT


SIGNATURE

DATE 08/04/2008

NOTARY

*State of Florida
County of Duval*

*The foregoing instrument was acknowledged before
me this 5th day of August, 2008. by
LORRAINE Williams.*



Linda M. Gilbert
Notary Public State of Florida
My Comm. Exp. August 15, 2010
Comm. No. DD 585324