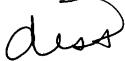
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SECRETARY OF STATE

FILED

10/1/09

COVER LETTER

TO: Amendment Section		
Division of Corporations		
Sans of a statistical		
SUBJECT: Dissolution of Incorp	poration	
DOCUMENT NUMBER: P0900005	51257	
The enclosed Articles of Dissolution and f	ee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Sadat Smith		
(Name of	Contact Person)	
Century Pain and Rehab, Inc		
(Firm/Company)		
	• •/	
3231 Old Winter Garden Rd, Ste 6		
(A	ddress)	
Orlando, Fl 32805		
(City/State and Zip Code)		
For further information concerning this ma	tter, please call:	
Sadat Smith (Name of Contact Person)	at (407) 8578407 (Area Code & Daytime Telephone Number)	
(Name of Contact Potoon)	(rica code a bayamo retepione realises)	
Enclosed is a check for the following amou	ent:	
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 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	

ARTICLES OF DISSOLUTION

FILED

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits articles of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: Century Pain & Rehab, Inc The document number of the corporation (if known): P09000051257 SECOND: The file date of the articles of incorporation: 06/12/2009 THIRD: 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. Signature: (By a director, 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.) Sadat Smith (Typed or printed name of person signing)

Filing Fee: \$35