P11000039759

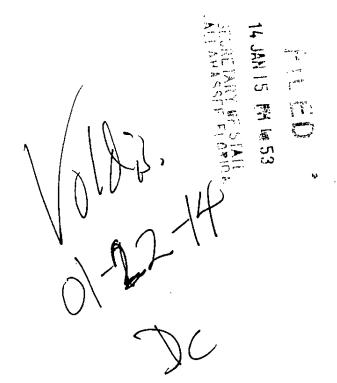
(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: DIAGNOSTIC SO	ONOGRAPHY	/ INC		
DOCUMENT NUMBER: P11000	039759			
The enclosed Articles of Dissolution and for		3.		
Please return all correspondence concerning	g this matter to the follow	ring:		
NELSON GUZMAN				
(Name of Contact Person)				
DIAGNOSTIC SONOGRAPHY INC				
(Firm	n/Company)			
601 SW 57 AVE Si, te	I.			
MIAMI, FL 33144	ddress)			
(City/Sta	te and Zip Code)			
For further information concerning this man	tter, please call:			
NELSON GUZMAN	at (305) 9	51-3394		
(Name of Contact Person)	(Area Code &	Daytime Telephone Number)		
Enclosed is a check for the following amou	int:			
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$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	Ame Divis Clift	EET ADDRESS: Indment Section Ision of Corporations In Building 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 State: DIAGNOSTIC SONOGRAPHY, INC. The document number of the corporation (if known): P11000039759 SECOND: The date dissolution was authorized: 12/31/2013 THIRD: Effective date of dissolution if applicable: 12/31/2013

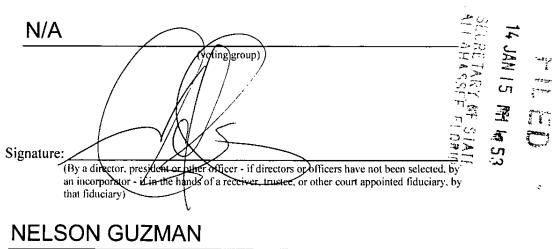
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

- Dissolution was approved by the shareholders. The number of votes cast for dissolution 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



(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35