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COVER LETTER

Division of Corporations SUBJECT: __ P11000048544 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARICEL HERNANDEZ (Name of Contact Person) ECA OF TAMPA BAY CORP (Firm/Company) 17601 CLOVER CREEK PL (Address) LUTZ, FL 33549 (City/State and Zip Code) For further information concerning this matter, please call: 813-416-6617 MARICEL HERNANDEZ (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee ■ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional copy is enclosed) enclosed) STREET ADDRESS:

MAILING ADDRESS:

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 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: ECA OF TAMPA BAY CORP					
SECOND:	The document number of the corporation (if known):					
THIRD:	The date dissolution was authorized:					
	Effective date of dissolution if applicable:					
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.					
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
						(voting group)
	Signature: //autce/ / / / / / / / / / / / / / / / / / /					
	MARICEL HERNANDEZ					
	(Typed or printed name of person signing)					
	PRESIDENT & DIRECTOR					
	(Title of person signing)					