P11000059212

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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution of s corp	oration	
DOCUMENT NUMBER: P110000)59212	
The enclosed Articles of Dissolution ar	d fee are submitted	for filing.
Please return all correspondence concern	ning this matter to t	he following:
Mariana Cushion		
(Name	of Contact Person)	
My Medical Business Service	, Inc	
(1	irm/Company)	
702 San Remo Drive		errore de la companya de la company La companya de la co
Weston, FL 33326	(Address)	· And The Head And And And And And And And And And An
	State and Zip Code)
For further information concerning this	natter, please call:	•
Mariana Cushion	at (305	
(Name of Contact Person)	(Area	Code & Daytime Telephone Number)
Enclosed is a check for the following an	ount:	
▼\$35 Filing Fee □\$43.75 Filing Fee Certificate of Statu		
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

Pursuant to section 607.1401, 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	:
	My Medical Business Service, Inc	
SECOND:	The document number of the corporation (if known): P11000059212	
THIRD:	The file date of the articles of incorporation: June 27,2011	
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.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SEVENTH:	: Adoption of Dissolution (CHECK ONE)	AND T
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	海流
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	- if
	Mariana Cushion (Typed or printed name of person signing)	
	President (Title of Person Signing)	

Filing Fee: \$35