Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

: (305)552-5973

Fax Number

: (305)675-5944

DISSOLUTION OR WITHDRAWAL **LUNA PHARMACY & DISCOUNT CORP**

	<u> </u>
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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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:					
	LUNA PHARMACY & DISCO	000	+ (D 1		
SECOND:	The document number of the corporation (if known): P12000	02	<u>50</u>	ML		
THIRD:	The date dissolution was authorized: 0-12-14					
	Effective date of dissolution if applicable: (no more than 90 days after dissolution)	ztion file de	ate)			
FOURTH:	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes of was sufficient for approval.	ast for d	issolu	tion		
	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	CAHASST	JUN 12			
	(voting group)	— Ti	A	2		
			9։ 5կ	6		
	Signature: (By a director, president or other officer - if directors or officers have not been selected, an incorporator - if in the bands of a receiver, trustee, or other court appointed fiduciary, that fiduciary)					
	Adrian Padron					
	(Typed or printed name of person signing)					
	PRESIDENT					
	(Title of person signing)	_				

Filing Fee: \$35