P9500009140

| (Reques | tor's Name) | | | |
|--------------------------------|-----------------|----------|--|--|
| (Address | s) | <u> </u> | | |
| (Address | 5) | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | WAIT | MAIL | | |
| (Busines | s Entity Name) | | | |
| (Docume | ent Number) | | | |
| Certified Copies | Certificates of | Status | | |
| Special Instructions to Filing | Officer: | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



500057968705

08/01/05--01014--012 **35.00

FILED

05 AUG -1 PN 2: 16

SECRETARY OF STATE
TALLAHASSEE FLORIDA



†\$mim AUG 0 1 2005

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | | |
|--|--|---|--|--|--|
| | | | | | |
| SUBJECT: Dissolution of Florida Oxygen Inc | | | | | |
| DOCUMENT NUMBER: P9500000 | 9140 | | | | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| Y. Morris Stanton | | | | | |
| (Name of Person) | | | | | |
| OICr | " /G | | | | |
| (Name of Firm/Company) | | | | | |
| 8405 N Pine Haven | | | | | |
| (Ad | ldress) | | | | |
| Crystal River, Fl 344 | -28 | | | | |
| (City/State | e/and Zip Code) | - | | | |
| For further information concerning this matt | er, please call: | | | | |
| Y. Morris Stanton | at (352) 79 | 95-9192 | | | |
| (Name of Person) | · | Daytime Telephone Number) | | | |
| Enclosed is a check for the following amoun | ıt: | | | | |
| \$35 Filing Fee \$\bigcup \$43.75 Filing Fee & \bigcup Certificate of Status | \$43.75 Filing Fee & [Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) | | | |
| MAILING ADDRESS: | | ET ADDRESS: | | | |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | | | | |
| P.O. Box 6327 | 409 E. Gaines Street | | | | |
| Tallahassee, Florida 32314 | Tallahassee, Florida 32399 | | | | |

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 corpo | ration as currently filed with | the Florida Departme | ent of State: | | |
|---------|---|---|---------------------------------------|----------------------|--|--|
| | Florida Oxyge | en,Inc . | | <u> </u> | | |
| SECOND: | The document number | The document number of the corporation (if known): P95000009140 | | | | |
| THIRD: | | as authorized: 6/20/05 | | | | |
| | Effective date of disso | lution <u>if applicable:</u> (ño n | nore than 90 days after disso | lution file date) | | |
| FOURTH: | Adoption of Dissolution | on (CHECK ONE) | | | | |
| | Dissolution was ap was sufficient for a | proved by the shareholders. 'upproval. | The number of votes | cast for dissolution | | |
| | Dissolution was ar | proved by of the shareholder | s through voting grou | ips. | | |
| | The following statement to vote separately on | nt must be separately provide the plan to dissolve: | ed for each voting gro | up entitled | | |
| | The number of votes ca | st for dissolution was suffici | ent for approval by | | | |
| | | | | 05 SEC | | |
| | · | (voting group) | | | | |
| | Signed this 22 | day of June | | S -I | | |
| | | | | FFS P | | |
| | a yas | | | RATE OF | | |
| | | ent or other officer - if directors or off in the hands of a receiver, trustee, or off | | | | |
| | Y. Morris | Stanton | | | | |
| | (Турс | ed or printed name of person signing) | | | | |
| | Secretar | y Treasurer | | | | |
| | | (Title of person signing) | · · · · · · · · · · · · · · · · · · · | - | | |

Filing Fee: \$35