P9600051941

400903513304--6 -12/3570--01100--007 *****43.75 *****43.75

December 21, 2000

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

I hereby am giving notice (in accordance with section 607.1403 of Florida Statutes) of dissolving the Corporation, of which I am the President of, **Dr. F. Moghadasi & Associates**, **P.A.**, located at 319 U.S. Hwy 27 South, Dundee, FL 33838.

This Corporation has ceased operating since April 1st, 2000. All financial obligations of the Corporation have been settled and banking relationships have been terminated.

Enclosed please find check for the amount of \$43.75 and two sets of "ARTICLES OF DISSOLUTION". Please forward the Certified copy of the Dissolution to my address below.

Thank you,

Farid Moghadasi, D.M.D.

5608 U.S. Highway 98 North

Lakeland, FL 33809

(863)858-7600

(863)559-4491

Document # P96000051941 FEI Number 59-3387136 OO DEC 26 AM 8: 16
SECKETARY OF STATE
TALLAHASSEE, FI ORIGINA

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the UFSIAIE following articles of dissolution:
FIRST: The name of the corporation is: Dr. F. Moghadasi & Associates, P.A.
319 U.S. Hwy 27 South, Dunder, FL 33838
SECOND: The date dissolution was authorized: /2/20/00
THIRD: 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 vote of 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)
Signed this 20th day of December, 2000,
Signature(By the Chairman or Vice Chairman of the Board, President, or other officer)
FARID MOGHADASI, DMD (Typed or printed name)
President