

P96000084643

Health InFacts, Inc.

P.O. Box 887
Mount Dora, Florida 32757-0886

Telephone/Fax (352) 589-1699
E-Mail hthinfo@aol.com

November 27, 1999

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

600003060256--3
-12/03/99--01064--013
*****35.00 *****35.00

Re: Dissolution of Corporation
Health InFacts, Inc. FEI#: 59-3418456

Dear Division of Corporations Representative:

Enclosed is a completed form #311 (Dissolution of Profit Corporation) in accordance with section 607.0123 of the Florida Statutes. A money order for \$35.00 is also enclosed for filing this article of amendment.

If further information is required, please contact me at 352/483-0785 or Fax# 352/589-1699.

We appreciate your assistance.

Sincerely,

Laura A. Clark

Laura A. Clark
President

Enclosures (2)

FILED
99 DEC -3 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

validis

T. LEWIS DEC 9 1999

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

99 DEC -3 PM 4:50
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is: HEALTH INFACTS, INC.

SECOND: The date dissolution was authorized: 11/27/99, Effective date: 12/31/99

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 27th day of November, 19 99.

Signature _____

Laura A. Clark
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Laura A. Clark

(Typed or printed name)

President

(Title)