1824 Atlantic Boulevard, Jacksonville, FL 32207 (904) 399-2766 • FAX (904) 399-2712

July 14, 2000

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

To Whom It May Concern:

RE: MISSION HEALTH PLAN, INC. - TAX ID #59-3494176

This is a written confirmation voluntarily dissolving the corporation referenced above. Enclosed you will find the Articles of Dissolution along with the appropriate filing fee. Upon completion, please forward a Certificate of Status to:

Mr. Clifford R. Frank 1824 Atlantic Boulevard Jacksonville, FL 32207-3404

If you have any questions or need additional information, you may contact me at 904/399-2766. Thank you in advance for your assistance with this matter.

Sincerely,

Clifford R. Frank

President

CF/dp

enclosure

00 AUG -8 PH 6: 2:
SECKETARY OF STAT

c:word\misc\dissolution

T BROWN AUG 1 6 2000

vol. Diss.

ARTICLES OF DISSOLUTION

<u>- </u>
· N.
ARTICLES OF DISSOLUTION ARTICLES OF DISSOLUTION Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following 6.23
Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following 6:23 articles of dissolution:
FIRST: The name of the corporation is: Mission Lea Ula Plan, ILC.
SECOND: The filing date of the articles of incorporation was:
THIRD: (CHECK ONE)
None of the corporation's shares have been issued.
The corporation has not commenced business.
FOURTH: No debt of the corporation remains unpaid.
FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SIXTH: Adoption of Dissolution (CHECK ONE)
☐ A majority of the incorporators authorized the dissolution.
A majority of the directors authorized the dissolution.
Signed this
directors, by In incorporator.) Cli How A. Frank (Typed or printed name)
President (Title)