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*Fernando A. Barberena*

1817 South Ocean Dr., #520

Hallandale, FL 33009

Phone: (954) 458-6225

Fax: (954) 454-4217

April 10<sup>th</sup>, 2000

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

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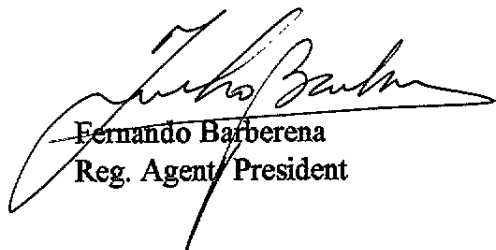
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Dear Sirs:

Enclosed are the Articles of Dissolution for Biomedical Institute of Florida, Inc.  
Enclosed you will find a check for the filing fee.

If you have any further questions, please call me at the above numbers. Thank you.

Sincerely,

  
Fernando Barberena  
Reg. Agent/ President

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 APR 18 PM 1:13

Dissolution  
LFE 4-26-2000

## ARTICLES OF DISSOLUTION

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR 18 PM 1:13

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

FIRST: The name of the corporation is: BIOMEDICAL INSTITUTE OF FLORIDA, INC.  
1817 S. OCEAN DR., STE. 520, HALLANDALE BEACH, FL 33009

SECOND: The date dissolution was authorized: APRIL 10th, 2000

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.

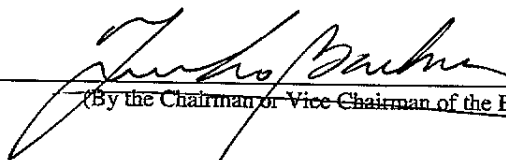
*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

Signed this 11th day of APRIL, ~~19~~ 2000.

Signature

 PRESIDENT  
(By the Chairman or Vice Chairman of the Board, President, or other officer)

FERNANDO BARBERENA  
(Typed or printed name)

PRESIDENT

(Title)