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COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | |
|--|---|--|--|--|--|--|
| SUBJE | GMG group; of Miami, ELG .CT: | | | | | |
| | (Name of Limited Liability Company) | | | | | |
| | | | | | | |
| The en | closed Articles of Dissolution and fee(s) are s | abmitted for filing. | | | | |
| Please | return all correspondence concerning this mat | ter to the following: | | | | |
| | Lourdes M' landron-Garcia | | | | | |
| | *************************************** | (Name of Person) | | | | |
| | GMC Group Of Miami | ر با المراجعة بالقرار المراجعة | | | | |
| | | (Firm/Company) | | | | |
| | 3241 SW 21 St. | | | | | |
| | | (Address) | | | | |
| | Miami, Fl. 33145 | | | | | |
| | (C | ty/State and Zip Code) | | | | |
| For fur | her information concerning this matter, pleas | call: | | | | |
| | Lourdes M. Landron Garcia | 305- 283-9010; at'() | | | | |
| | (Name of Person) | (Area Code & Daytime Telephone Number) | | | | |
| Enclosed | I is a check for the following amount: | | | | | |
| ☐ \$25:00 Filing Fee and Certificate of Dissolution | | ☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed) | | | | |
| Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | | |

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liab | ility company is | PM 440 0 10 10 0 10 10 10 10 10 10 10 10 10 1 | *************************************** | |
|--|---|---|---|--|
| 2. The Articles of Organization | on were filed on 10- | 16-2009 | and assig | ned |
| document number L091000 | 010548 | 7 T 5 S 10 S 20 T marrows 4 | | |
| 3. The delayed effective date (effective Mote: If the date inserted in disted as the document's effe | this:block does not m | ieet the applicable sta | itutory filing requirements | exceived for filing) s, this date will not be |
| 4. A description of occurrence 605.0707, Florida Statutes, | e that resulted in the (copy 605.0707 on l | e limited liability co back cover letter). | ompany's dissolution p | ursuant to section |
| The entity was closed, and w | as reinstated with out | consent | | والمستورة وا |
| The entity was closed, and w | as reinstated with out | consent. | | A STATE OF THE STA |
| The entity was closed, and wa | as reinstated with out o | consent . | | |
| *************************************** | | | , 1 | |
| If there are no members, en activities and affairs: | nter the name and ad Lourdes M. Landro | | appointed to wind up t | he company's |
| | 3241 SW 21 St., M | fiami. Fl 33145 | | , |
| | | *************************************** | | |
| Signature of an authorized above to wind up the company | person or if there are | e no members, the airs: | signature of the person | appointed and listed |
| /W/ | | Lourdes M'I | Landron García | |
| Signature | | Printed Name | | |
| | FILL | NG FEE: \$25:00 | | |