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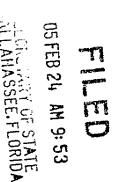
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TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations SUBJECT: DISSOLUTION DOCUMENT NUMBER: P04000122016 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **CARLOS MAZA** (Name of Person) (Name of Firm/Company) 4940 EAGLESMERE DRIVE # 522 (Address) ORLANDO FL 32809 (City/State/and Zip Code) For further information concerning this matter, please call: at (_407____) 363-5971 **CARLOS MAZA** (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ☑ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) STREET ADDRESS: MAILING ADDRESS: Amendment Section Amendment Section Division of Corporations Division of Corporations 409 E. Gaines Street P.O. Box 6327 Tallahassee, Florida 32314 Tallahassee, Florida 32399

seginning of tax year

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with Department of State:			
<u>FL</u>	ORIDA TRUST HOME INSPECTION CORP.		
SECOND:	SECOND: The document number of the corporation (if known): P04000122016		
THIRD:	The file date of the articles of incorporation was: 08/24/2004		
FOURTH:	(CHECK AT LEAST ONE BOX)		
	None of the corporation's shares have been issued.		
	☐ The corporation has not commenced business. ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		
FIFTH:	No debt of the corporation remains unpaid.		
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.		
SEVENTH:	Adoption of Dissolution (CHECK ONE)		
A majority of the incorporators authorized the dissolution.			
Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator -			
	if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)		
CARLOS MAZA (Typed or printed name of person signing)			
	PRESIDENT (Title of person signing)		

nd of tax year

Filing Fee: \$35