## Florida Department of State **Division of Corporations** Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CSH SERVICES, LLC

Account Number : 120070000160

Phone : (800)494-3124

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# DISSOLUTION OR WITHDRAWAL

#### MASTER PLAN GROUP INC.

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## ARTICLES OF DISSOLUTION

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

| FIRST:  | The name of the corporation as currently filed with the Florida Department of State:   |
|---------|--|
|         | MASTER PLAN GROUP INC.   |
| SECOND: | The document number of the corporation (if known): P06000028526  |
| THIRD:  | The date dissolution was authorized: 5/16/2008   |
|         | Effective date of dissolution if applicable:  (no more than 90 days after dissolution file date)   |
| FOURTH: | 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 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)  (voting group)  |
|         | 6 FAR  |
|         | (voting group)   |
|         | 5 Alle   |
|         | Signature:   |
|         | (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the bands of a receiver, trustee, or at her sount appointed fiduciary, by that fiduciary) |
|         | ROCIO BONELLI-GANOZA   |
|         | (Typed or printed name of person signing)  |
|         | PRESIDENT  |
|         | (Title of person signing)  |