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COVER LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: DISOLVE SHOW (4 STE ASSOCIATES INC.	
DOCUMENT NUMBER: 59-1876768	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
GRAHAM WOOD DROVT (Name of Contact Person)	
SHOW CASE ASSOCIATES INCORPORATED (Firm/Company)	
V1801 SW B) ROAD (Address)	
PINECRESS, FLORIDA 33156 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) (Name of Contact Person) (Area Code) (Duytime Telephone Num	nber)
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 (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)	
Mailing Address: Amondment Services Amondment Services	
Amendment Section Amendment Section Division of Corporations Division of Corporations	
P.O. Box 6327 The Centre of Taliahassee	
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 8	310

Tallahassee, FL 32303

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:
	SHOWCASE ASSUCIATES INCORPORATED
SECONO:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: APRIL 1, 2024
	Effective date of disserbation if appaientates
	(no more than 40 days after disculution (ils date) Note: If the date inscried in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.
•	
,	
	Signature: (By a discrime, president of conce offices - if discrimes or other count appointed fiduciary, by that fiduciary)
	GRAHAM WOOD DROUT (Typed or primed name of person signing)
	PRESIDENT (Title of person signing)

Filing Fee: \$35

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:
	SHOWCASE ASSUCIATES INCORPORATED
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: APRIL 1, 2024
	Effective date of describition if applicable. (no new than 90 days after discutation tila date) Note: If the date inserted in this block does not meet the applicable stantory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.
•	
	(By a direction, profession, come white to it incorporate an other to be used by an incorporator of in the bands of a receiver, tractor, or other court appointed deluciary, by that fiduciary)
	GRAHAM WOOD DROUT (Typed or primed name of person signing)
	PRESIDENT (Title of person signing)

Filing Fee: \$35