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| PICK-UP |] WAIT | MAIL | | | |
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TO:

Registration Section

| Div | ision of Corporations | | | | | | |
|-------------------------------------|--|---|--|---------------------------------|--|--|--|
| SUBJECT: | Breaking Dawn, LLC | | | | | | |
| (Name of Limited Liability Company) | | | | | | | |
| | | | | | | | |
| The enclosed | Articles of Dissolution and fee(s) are submit | ted for fi | ling. | | | | |
| Please return | all correspondence concerning this matter to | the follo | wing: | | | | |
| | Ashlie Stevens | | | | | | |
| | (Name of Person) | | | | | | |
| | Breaking Dawn, LLC | | | | | | |
| | (Firm/Company) | | | | | | |
| | 280 126th Ave #210 | | | | | | |
| | | Address) | | | | | |
| | Treasure Island, FL 33706 | | | | | | |
| | (City/Sta | te and Zi | p Code) | | | | |
| For further in | formation concerning this matter, please call: | | | | | | |
| As | hlie Stevens | at | 727 | 330-5802 | | | |
| | (Name of Person) | | (Area Co | ode & Daytime Telephone Number) | | | |
| Enclosed is a | check for the following amount: | | | | | | |
| | | g Fee, Certificate of Dissolution & Copy (additional copy is enclosed) | | | | | |
| MAILING ADDRESS: | | | STR | EET/COURIER ADDRESS: | | | |
| | Registration Section | | Registration Section | | | | |
| | Division of Corporations P.O. Box 6327 | | Division of Corporations Clifton Building | | | | |
| | Tallahassee, FL 32314 | | 2661 Executive Center Circle Tallahassee, FL 32301 | | | | |

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability company is BreakingDawn,LLC | | | | | | | |
|-----------|--|--|----------------------------------|--|--|--|--|--|
| 2. | The Articles of Organization | n were filed on April 3,2014 | and assigned | | | | | |
| | document number L140000 | 254686 | | | | | | |
| 3. | The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted 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. | | | | | | | |
| 4. | A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). | | | | | | | |
| | The companywas not active, beyondestablishing an LLC name and filing. Articles of Organization. | | | | | | | |
| | The company no longer intend | ls to become active, thus wants to dissolve, effec | etive immediately. | | | | | |
| 5. | f there are no members, enter the name and address of the person appointed to wind up the company's | | | | | | | |
| | activities and affairs: | Ashlie Stevens | \$5 B | | | | | |
| 40.1 | | 280126thAve#210 | SSET O | | | | | |
| | | Treasuresland,FL 33706 | | | | | | |
| | | | N AUT | | | | | |
| 6. lis | Signature of an authorized pated above to wind up the con | person or if there are no members, the signal impany's activities and affairs: | ture of the person appointed and | | | | | |
| | Alberta | Ashlie Stevens | | | | | | |
| | Signature | | Printed Name | | | | | |

FILING FEE: \$25.00