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(Requestor's Name)

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(City/State/Zip/Phone #)

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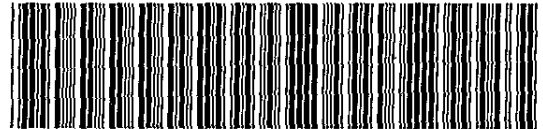
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wind Chasers
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HARLAN WALKER
(Name of Person)

Windchasers, LLC
(Firm/Company)

210 S. SANFORD AVE
(Address)

SANFORD, FL 32771
(City/State and Zip Code)

For further information concerning this matter, please call:

HARLAN WALKER at (407) 688-7377
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is Windchasers, Inc

SECOND: The articles of incorporation were filed on 3-25-04

THIRD: The corporation has not commenced to conduct its affairs.

FOURTH: No debts of the corporation remain unpaid.

FIFTH: Adoption of dissolution (**CHECK ONE**)

(Note: Cannot be authorized by an incorporator if the corporation has directors)

☐ The dissolution was authorized by a majority of the directors:
OR

☒ The dissolution was authorized by an incorporator.

☐ The dissolution was authorized by a majority of the incorporators.

Signed this 31st day of August, 2004

Signature

(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if Directors have not been selected by an incorporator)

HARLAN Walker
(Typed or printed name)

President
(Title)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA