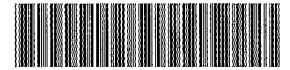
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION
DOCUMENT NUMBER: N0500005779
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BC BIERMANN (Name of Contact Person) TRANSMOLOGY INC. (Firm/Company)
(Name of Contact Person)
IRAnsmology Inc.
(Firm/Company)
FORT MYCRS, FL 33913 (City/State and Zip Code)
(Address)
FORT Myers, FL 33913
(City/State and Zip Code)
For further information concerning this matter, please call:
BC BIERMANN at (314) 479,4217
(Name of Contact Person) at (314) 479, 4217 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Striling Fee Status Certificate of Status Certified Copy (Additional copy is enclosed) Status Filing Fee & Status Certified Copy (Additional copy is enclosed) Status Filing Fee & Status Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

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 as currently filed with the Florida Department of State:	
	TRANSMOlogy Incorporated	
SECOND:	The document number of the corporation (if known): NOSOOOO5779	
THIRD:	The file date of the articles of incorporation:	
FOURTH	The corporation has not commenced to conduct its affairs.	
FIFTH:	No debts of the corporation remains unpaid.	
SIXTH:	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 an incorporator.	
	☐ The dissolution was authorized by an incorporator. ☐ The dissolution was authorized by a majority of the incorporators.	
	The dissolution was authorized by a majority of the incorporators. The dissolution was authorized by a majority of the incorporators. The dissolution was authorized by a majority of the incorporators. The dissolution was authorized by a majority of the incorporators.	
Signature: (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	(Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	

Filing Fee: \$35