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T. Roberts APR 2 4 2005.

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
SUBJECT: Dissolve Florida Corporation-Effective 5-1-06
DOCUMENT NUMBER: POIO00002527
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
La Verne Fernander (Name of Contact Person)
DyOnyx Contracting Corp. (Firm/Company)
10160 Vestal Ct. (Address)
Coral Springs, FL 33071 (City/State and Zip Code)
For further information concerning this matter, please call:
LaVerne Fernander at (561) 301-1695 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
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MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301



ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:
••	_ Dyonyx Contracting Corporation
SECOND:	The document number of the corporation (if known): POLOCOCO2527
THIRD: FOURTH:	The file date the articles of incorporation: 1-8-01 Effective date 5/1/06. (CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	☐ A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: Aulen June - (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) Laverne Fernander (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Pres. (Title of Person Signing)

Filing Fee: \$35