PO1000020609

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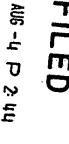
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SECRETARY OF STATE





COVER LETTER

Division of Corporations
SUBJECT: MY E GIFT STORE, INC
DOCUMENT NUMBER: P01000020609
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MICHAEL RAMIREZ
(Name of Contact Person)
MY E GIFT STORE, INC
(Firm/Company)
15844 SW 305 TERRACE
(Address)
HOMESTEAD, FL 33033
(City/State and Zip Code)
For further information concerning this matter, please call:
MICHAEL RAMIREZ at (786) 255-5440
(Name of Contact Person) (Area Code & Daytime Telephone Number)
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 Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

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:
	MY E GIFT STORE, INC,
SECOND:	The document number of the corporation (if known): P0100020609
THIRD:	The date dissolution was authorized: JULY 31, 2008
	Effective date of dissolution <u>if applicable:</u> JULY 31, 2008 (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
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	(voting group)
	ARETAR LASSE
	Signature: (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)
	MICHAEL RAMIREZ
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)

Filing Fee: \$35