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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Notice of Corporate Dissolution
DOCUMENT NUMBER: <u>PO1000022140</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
AARON Robert Winters
(Name of Contact Person)
Winterstudio, Inc. (Firm/Company)
(Firm/Company)
PO Box 47674 (Address)
Jacksonville, Florida 32247-7674 (City/State and Zip Code)
For further information concerning this matter, please call:
AARON Robert Winters at (904) 307-3519 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) Certificate of Status & 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 DISSOLUTIONE D

Pursuant to section 607.1403, Florida Statutes, this Florida profit perporation submits the following articles of dissolution:

PIDOT.	SECRETARY OF STATE TALLAHASSEE.FLORIDA
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Winterstudio, Inc.
SECOND:	The document number of the corporation (if known): PO100022140
THIRD:	The date dissolution was authorized: Jan. 1st, 2008
	Effective date of dissolution if applicable: Jon 184, 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
	(voting group)
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	(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)
	AARON Robert Winters (Typed or printed name of person signing)
	President (Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Winterstodio, Inc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.