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| Certified Copies | _ Certificates | s of Status | | |
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COVER LETTER

| Division of Corporations | |
|---|---|
| SUBJECT: Dissolution of Cor | poration |
| DOCUMENT NUMBER: P010000 | 68202 |
| The enclosed Articles of Dissolution and fee | are submitted for filing. |
| Please return all correspondence concerning t | his matter to the following: |
| Susan Cabrera Crolla | |
| , | ontact Person) |
| Association Managemen | · |
| | Company) |
| PO Box 13978 | |
| (Add | ress) |
| Tallahassee, FL 32317 | |
| (City/State | and Zip Code) |
| For further information concerning this matte | r, please call: |
| Susan Crolla | at (850) 212-6477 |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount | : |
| Certificate of Status | 1 \$43.75 Filing Fee & Sectified Copy (Additional copy is enclosed) Sectified Copy (Additional copy is enclosed) 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 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 Departmen | nt of State: | |
|----------|--|----------------|----------------------------------|
| | Association Management Sources, Inc. | | |
| SECOND: | The document number of the corporation (if known): P010000682 | 02 | |
| THIRD: | The file date of the articles of incorporation: 7/11/2001 | | |
| FOURTH: | (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 disto the shareholders, if shares were issued. | | |
| SEVENTH: | : Adoption of Dissolution (CHECK ONE) | IL APR 3 | Andread Andread Profession |
| | A majority of the incorporators authorized the dissolution. | - 444 - 0 | **** |
| | ☐ A majority of the directors authorized the dissolution. | E FLORIDA | - - - |
| Sign | (By a director, president of other officer - if directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) | n incorporator | - if |
| | Susan Cabrera Crolla | | |
| | (Typed or printed name of person signing) | | |
| | President (Title of Person Signing) | | |
| | CIME OF PERSON STRIMET | | |

Filing Fee: \$35