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(Business Entity Name)			
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SECRETARY OF STATE
ALL AHASSEF, FLORIDA

ED
AM 8: 11

COVER LETTER

TO: Amendment Section

Division of Corporations				
SUBJECT: <u>DISSOLUTION</u>				
DOCUMENT NUMBER: P0000010990				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Cividy Drr (Name of Contact Person)				
Southcoast Inc (Firm/Company)				
PO BOX 3059				
(Address)				
Stvart FL 34995 (City/State and Zip Code)				
'(City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (772) 286 5292 (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, \$\Bigcup \\$Certificate of Status & \$\Bigcup \\$Additional copy is enclosed\$\) Certified Copy (Additional copy is enclosed) (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:			
	Southcoast Towne Centre Inc			
SECOND:	The document number of the corporation (if known): PO200010	0990		
THIRD:	The date dissolution was authorized: April 15+ 200	7		
	Effective date of dissolution <u>if applicable:</u> (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 was sufficient for approval.	for dissolution		
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	entitled		
	The number of votes cast for dissolution was sufficient for approval by	07 APR 20 AM SECRETARY OF TALL AHASSEE!	FA:	
	(voting group)	O AL	四百	
		F STATE		
	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)			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			

Filing Fee: \$35