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TRANSMITTAL LETTER

SUBJECT: ARTCLES OF DISSOLUTION DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: AREGORY MOTAENEC (Name of Person) CAIN TRANS PARTATION (Name of Firm/Company) TLOQ NW 36 th PLACE (Address) GARINES VILLE FL 32404 (City/State/and Zip Code) For further information concerning this matter, please call: CAE GORY J. MOTRENEC at (352) 204 9167 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{array}	TO: Amendment Section Division of Corporations	
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(Name of Person) GAIN TRANS PERTATION (Name of Firm/Company) The ORING SUITE (Address) GAINES VITE (Address) GAINES VITE (Address) GAINES VITE (Address) GAINES VITE (Address) (City/State/and Zip Code) For further information concerning this matter, please call: (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{align*} \text{\$35\$ Filing Fee} & \$\Begin{align*} \text{\$43.75 Filing Fee} & \$\Central{2} \text{\$52.50 Filing Fee}, \ Certificate of Status & Certified Copy (Additional copy is enclosed)} MAILING ADDRESS: STREET ADDRESS:	The enclosed Articles of Dissolution and fee are submitted for filing.	
(Name of Firm/Company) The oral NW 316 th PLACE (Address) GRIN TRANSPORTATION (Name of Firm/Company) The oral NW 316 th PLACE (Address) GRIN TRANSPORTATION (Address) GRIN TRANSPORTATION (Name of Firm/Company) (Address) For further information concerning this matter, please call: (City/State/and Zip Code) For further information concerning this matter, please call: (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: (Additional copy is certificate of Status & Certificate of St	Please return all correspondence concerning this matter to the following:	
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GANESVIIE, FL 32606 (City/State/and Zip Code) For further information concerning this matter, please call: GREGON J. Motrevec at (352) 204 9167 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$\text{\$\text{935}\$ Filing Fee} \$\text{\$\text{\$43.75}\$ Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed) MAILING ADDRESS: STREET ADDRESS:	GAIN TRANSPORTATION, INC. (Name of Firm/Company)	
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□ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) MAILING ADDRESS: □ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) STREET ADDRESS:	CREGORY J. MOTRENEC at (352) 204-9167 (Name of Person) (Area Code & Daytime Telephone Number	т)
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Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

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 Department of State:
	GRIN TRANSPORTATION, INC.
SECOND:	The document number of the corporation (if known): PODODDH3806
THIRD:	The file date of the articles of incorporation was: April 16, 2003
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:	No debt of the corporation remains unpaid. 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.
	Signed this 30 day of MARCH , 8004.
Signatu	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the pands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	GREGORY J. MOTRENEC (Typed or printed name of person signing)
	PRESIDENT (Title of person signing)

Filing Fee: \$35