P02000044493

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(Ad	ldress)			
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TALLIAHASSEE, FLORIDA

AND 155/000 10/10/10

COVER LETTER

TO: Amendment Section	€
Division of Corporations	*
SUBJECT: Dissolution of Corporation	
DOCUMENT NUMBER: P0200004449	3
The enclosed Articles of Dissolution and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Christine M Solazzi	
(Name of Conta	act Person)
Kube Quest, Inc.	
(Firm/Con	mpany)
3021 30th Court	
(Addres	s)
Jupiter, Florida 33477	
(City/State and	d Zip Code)
For further information concerning this matter, p	please call:
	at (561) 339-1500
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	•
(A	13.75 Filing Fee & \$\bigsiz \\$52.50 Filing Fee, crtified Copy dditional copy is nclosed)
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 607.1403, 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 S	tate:	•	
	Kube Quest, Inc.			
SECOND:	The document number of the corporation (if known): P02000044493			
THIRD:	The date dissolution was authorized: 10/04/2010	-,,	.	
	Effective date of dissolution if applicable: 10/04/2010 (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 was sufficient for approval.	dissolutio	On	
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group enti- to vote separately on the plan to dissolve:	tled		
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)		,	
	Signature: (By a director, president or other officer) if directors or officers have not been selected, by aprincorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) Christine M. Solazzi (Typed or printed name of person signing)	10 OCT -6 AM 10: 01	SECRETARY OF STATE	
			⊅	
	President (Title of servon signing)			
	() The of secon company			

Filing Fee: \$35