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COVER LETTER

TO: Amendment Section

Division of Corporations				
SUBJECT: Andiamo Team, Inc.				
DOCUMENT NUMBER: P02000071611				
The enclosed Articles of Dissolution and fee are s	ubmitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
Wayne H. Miller, Es	ad.			
(Name of Contact Person)				
Mombach, Boyle & Hardin, P.A.				
(Firm/Company)				
500 East Broward Boulev	vard, Suite 1950			
(Address)				
Fort Lauderdale,	FL 33394			
(City/State and Zip Code)				
For further information concerning this matter, plea	ase call:			
Heather G. Gonzalez	(⁹⁵⁴) 467-2200			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
(Addi	75 Filing Fee & \$\Bigcup \\$52.50 Filing Fee, fied Copy Certificate of Status & 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 OF ANDIAMO TEAM, INC., a Florida corporation

Pursuant to Section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is Andiamo Team, Inc., a Florida limited liability

company (the "Corporation").

SECOND: The date dissolution was authorized was June 30, 2008. The dissolution shall be

effective upon the filing of these Articles of Dissolution.

THIRD: Dissolution was approved by the shareholders at a special meeting of shareholders

dated June 30, 2008. The number of votes cast for dissolution by the shareholders

was sufficient for approval.

FOURTH: The undersigned, as President of the Corporation, is authorized to execute these

Articles of Dissolution

Theresa Doyle, President

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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 C	orporate Dissolution" is optional and i	s not required when filing a voluntary dis-	solution.
Name of Corpora	tion: Andiamo Team, Inc.		
Date of dissolution	n will be the date the dissolution is file rticles of Dissolution.	d with the Department of State or as	
Description of inf	ormation that must be included in a cla	im:	
Name of Clair	mant (and name of contact person	on)	
Nature of Cl	aim (including bills, invoices	, receipts, etc.)	
Amount of Cl	aim		
Address and	Telephone No. of Claimant		
Mailing address v	where claims can be sent: (Claims cannot	ot be sent to the Division of Corporations)	ı
	Staten Island, NY 10310		
_	Attn: Theresa Doyle		
	ne above named corporation will be bar er the filing of this notice.	red unless a proceeding to enforce the cla	im is commenced
Theresa Do	ovle	UNTONONI	1 Del
	Printed Name of the Person Filing	Signature of the Person F	iling