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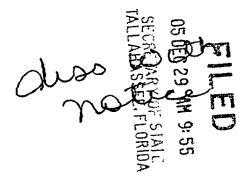
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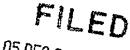
COVER LETTER

TO: Amendment Section

Division of Corporations SUBJECT: Elberg, Inc. DOCUMENT NUMBER: P02000072921 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Clark Eldredge (Name of Contact Person) (Firm/Company) 2105 Skyland Dr (Address) Tallahassee, FL 32303 (City/State and Zip Code) For further information concerning this matter, please call: Clark Eldredge (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: □\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) MAILING ADDRESS: STREET ADDRESS: Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FILED



Pursuant to s of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the field lighting articles in: SECRETARY OF STAIL TALLAHASSEE, FLORIDA		
FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	Elberg, Inc		
SECOND:	The document number of the corporation (if known): P02000072921		
THIRD:	The date dissolution was authorized: 12/27/2005		
	Effective date of dissolution if applicable: 12/31/2005 (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 dissolution was sufficient for approval.		
	Dissolution was approved by of the shareholders through voting groups.		
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:		
	The number of votes cast for dissolution was sufficient for approval by		
	(vating group)		
\$	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)		
	Clark Eldredge		
	(Typed or printed name of person signing)		
	Director		
	(Title of person signing)		

Filing Fee: \$35

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	Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corpora	tion:_Elberg, Inc
Date of dissolution	on will be the date the dissolution is filed with the Department of State or as a strictles of Dissolution.
Description of in	formation that must be included in a claim:
Amount and	nature of claim; date of activity that prompted claim;
copies of sup	porting documents substantiating claim: orders, signed documents
showing rece	eipt of item or activity that prompted claim, contracts for service, etc; and
corporate offi	cial who authorized activity that resulted in the claim.
Mailing address	where claims can be sent: (Claims cannot be sent to the Division of Corporations) Elberg, Inc Claims
	C/O Clark Eldredge
	2105 Skyland Dr
	Tallahassee, FL 32303
	the above named corporation will be barred unless a proceeding to enforce the claim is commenced fter the filing of this notice.
Clark Eldred	Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00