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SECRETARY OF STATE
TALLAHASSEE, FLORINA

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Corp. Discolution	
DOCUMENT NUMBER: PORCOO	80499
The enclosed Articles of Dissolution and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	he following:
Christphe of Bargie (Name of Contact Person)	1
(
Enter Brit, com Co. (Firm/Company)	(P
1662C CIN CST	
16635 SW 65T (Address)	
Pembrule Pines, FC 33. (City/State and Zip Code)	027
For further information concerning this matter, please call:	
Christopher Borgiel at (95) (Name of Contact Person) (Area	(4) 447-0843 Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
S35 Filing Fee \$\bigcup\$43.75 Filing Fee & \$\bigcup\$\$43.75 Filing Fee & \$\bigcup\$\$\$\$ \$Certified Copy (Additional copy enclosed)	7
MAILING ADDRESS: Amendment Section	STREET ADDRESS: 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

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

FI RST :	The name of the corporation as currently filed with the Florida Department of State:		
	Enterprition corporation		
SECOND:	The document number of the corporation (if known): PO2 0000 804	199	
THIRD:	The date dissolution was authorized 7/24/2002		
	Effective date of dissolution if applicable: 07/01/2006 (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 dissol was sufficient for approval.	ution	
	Dissolution was approved by 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	gen.	
	SECONO O		
	(voting group) ARY OF STATE ASSEE, FLORIDE 4.5	ן : כ	
5	Signature: (By a director, predident 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)	•••	
	Christopher Bargiel (Typed or printed name of person signing)		
	President (Title of person signing)		

Filing Fee: \$35