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| (Requestor's Name) | | | | | | | |
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| PICK-UP WAIT MAIL | | | | | | | |
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| (Business Entity Name) | | | | | | | |
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| Certified Copies Certificates of Status | | | | | | | |
| Certified copies Certificates of Status | | | | | | | |
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| Special Instructions to Filing Officer: | | | | | | | |
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<u>COVER LETTER</u>

TO: Amendment Section

| Divisio | n of Corporations | | | |
|------------------------------|--|-------------------|--|---|
| SUBJECT: | Dissocution | of | Corner | TION. |
| DOCUMENT I | NUMBER: P02 | 000 | 82196 | |
| The enclosed A | rticles of Dissolution and | fee are | submitted fo | r filing. |
| Please return all | correspondence concerni | ing this r | natter to the | following: |
| | Mohammad B | angasl | ١. | |
| | (Name o | of Contac | t Person) | |
| | | | • | |
| | (Fi | rm/Com | pany) | |
| | 19510 SU S | _k .st. | | |
| | (| Address |) | |
| | Miramar | FL | 33029. | |
| | (City/S | tate and | Zip Code) | |
| For further info | rmation concerning this n | natter, pl | ease call: | |
| Moha | mmad Bargash | a | at <u>(786</u> |) 393 4889 · ode & Daytime Telephone Numbe |
| (Nan | ie of Comact Person) | | (Area C | ode & Dayanie Telephone Numbe |
| | neck for the following am | | | _ |
| \$35 Filing Fe | ee []\$43.75 Filing Fee & Certificate of Status | (Ad | 3.75 Filing F tified Copy ditional copy closed) | cee & \$\infty\$\$ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
| Amenda Divisio P.O. Bo | nG ADDRESS: ment Section n of Corporations ox 6327 ussee, FL 32314 | | s | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

2005 NOV 21 AM 10: 55 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 State: | | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|--|
| | Warch WARWICK CONSULTING and Morketing Inc. | | | | | | | | | |
| SECOND: | The document number of the corporation (if known): Po20000 82196. | | | | | | | | | |
| THIRD: | The date dissolution was authorized: 10-1-2005 | | | | | | | | | |
| | Effective date of dissolution if applicable: (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 | | | | | | | | | |
| | Mohammad Bangash. (voting 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) | | | | | | | | | |
| | MOHRMAS BANEASH . (Typed or printed name of person signing) | | | | | | | | | |
| | (Typed or printed name of person signing) | | | | | | | | | |
| | PRESIDENT. | | | | | | | | | |
| | (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 Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

| Name of Corpora | ition: | JARWICK | CONSULTINI | acha 3 | MARKETING 1 | NC . |
|--|--------------------|------------------|----------------------|---------------|-----------------------------|----------------|
| | on will be the dat | e the dissolut | ion is filed with th | | | |
| Description of in | formation that m | ust be include | ed in a claim: | | | |
| | | | | | | |
| | | | | <u>, .</u> | | |
| | | _ | | | | |
| | | | | <u></u> - | | |
| Mailing addrags | where obsime car | he sent: (Cla | pims cannot he sen | t to the Divi | ision of Corporations) | |
| Mannig address | | | | | | |
| - | | Miramo | or FL 3 | 3029. | | |
| - | | <u> </u> | <u> </u> | | <u> </u> | |
| - | | | | | · | |
| A claim against t within 4 years af | | | will be barred unle | ss a proceed | ling to enforce the clain | n is commenced |
| | Maria | . R. | | | AB D | |
| | Printed Name of t | he Person Filing | 15µ. | <u>-</u> | Signature of the Person Fil | ing |