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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: ____ P03000080296 **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **GEORGE GLOVER** (Name of Contact Person) (Firm/Company) 18395 MASON SMITH RD (Address) **BROOKSVILLE FL 34604** (City/State and Zip Code) For further information concerning this matter, please call: at (⁽³⁵²⁾ 754-1429 GEORGE GLOVER (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

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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 State: COMPASS DESIGN, INC | | |
|---------|--|--|--|
| SECOND: | The document number of the corporation (if known): | | |
| THIRD: | The date dissolution was authorized: DEC 31, 2018 | | |
| | Effective date of dissolution if applicable: DEC 31, 2018 | | |
| | (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. | | |
| 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 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 | | |
| | (voting group) SARRY OF A TO | | |
| | Signature: Learge Slaver | | |
| | (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) | | |
| | GEORGE GLOVER | | |
| | (Typed or printed name of person signing) | | |
| | PRESIDENT | | |
| | (Title of person signing) | | |