ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

CRISAFI SERVICES, INC.

SECOND: The document number of the corporation: P03000089872

THIRD: The date dissolution was authorized: September 16, 2014

FOURTH: Dissolution was approved by the shareholders. The number of votes cast for dissolution

was sufficient for approval.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: LISA M. NUDO PR, ESTATE OF P. CRISAFI

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED Sep 22, 2014 Secretary of State

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.

Name of Corporation:

CRISAFI SERVICES, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

THE SUBJECT MATTER OF THE CLAIM. THE DATE THAT THE CLAIM CAME INTO EXISTENCE. THE NAMES OF THE PEOPLE THAT ARE INVOLVED WITH THE CLAIM. ANY OTHER MATERIAL INFORMATION THAT PERTAINS TO THE CLAIM.

Mailing address where claims can be sent:

448 NARROWS ROAD CONNELLSVILLE, PA 15425 US

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155. Florida Statutes.

Signature: LISA M. NUDO

Electronic Signature of the Person Filing