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COVER LETTER

TO: Amendment Section
Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: PO3000132856
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Miriam Fulop
(Name of Person)
M & I Options, Inc
(Name of Firm/Company)
11045 NW 46th Drive
(Address)
Coral Springs, FI 33076-2134
(City/State/and Zip Code)
For further information concerning this matter, please call:
Miriam Fulop at (954) 755-4901
(Name of 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 Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, Florida 32314Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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: M & I Options, Inc The document number of the corporation (if known): PO30001328 SECOND: The file date the articles of incorporation: November 17, 2003 THIRD: FOURTH: (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid. SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. SEVENTH: Adoption of Dissolution (CHECK ONE) ✓ A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signed this 7th 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.) Miriam Fulop (Typed or printed name of person signing) President (Title of person signing)

Filing Fee: \$35