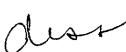
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| (Requ | uestor's Name) | |
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| (City): | State/Zip/Phone | <i>∓#)</i> |
| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | of Status |
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Office Use Only



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FILLU 05 FEB -2 PM 4: 11 SECRETARY OF STATE ANASSEE, FLORIDA

02/02/05--01023--010 **35.00

MR 214105

TRANSMITTAL LETTER

TO: Amendment Section

| Division of Corporations | |
|--|--|
| SUBJECT: DISSOLUTION OF PROFIT OR | GANIZATION |
| DOCUMENT NUMBER: PO400000349 | 87 |
| The enclosed Articles of Dissolution and i | fee are submitted for filing. |
| Please return all correspondence concernin | g this matter to the following: |
| DONALD RAY ADAMS | |
| (Name of | Person) |
| HOLLIS ADAMS INC | |
| (Name of | Firm/Company) |
| 1732 NORTHGLEN CIRCLE | |
| | (Address) |
| MIDDLEBURG FLORIDA 32068 | |
| (City/ | State/and Zip Code) |
| For further information concerning this ma | tter, please call: |
| DONALD RAY ADAMS | at (_904) _276-0722 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amou | int: |
| ■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status | Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 |

ARTICLES OF DISSOLUTION

| Pursuant to s of dissolutio | n: 05 FEB -2 PM 4: 11 |
|--------------------------------|---|
| FIRST: | SECRETARY OF STATE The name of the corporation as currently filed with the Department of STATE HOLLIS ADAMS INC |
| SECOND: | The document number of the corporation (if known): PO40000034987 |
| THIRD: | The date dissolution was authorized: AUGUST 1ST 2004 |
| | Effective date of dissolution <u>if applicable:</u> DECEMBER 1ST 2004 (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 |
| | (voting group) |
| | Signed this 01 day of FEBRUARY , 2005 . |
| Sìgna | ture: W.R.A. |
| | (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) |
| | OONALD RAY ADAMS (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |

Filing Fee: \$35