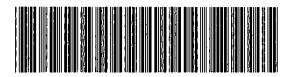
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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Vallair, Inc	· · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUMBER: Po40	000 53436	
The enclosed Articles of Dissolution and fee	are submitted for filing.	
Please return all correspondence concerning t	his matter to the following:	
Mark 6. Valle (Name of Co	2ry	
Vallair, Inc. (Firm/Company)		
3)0 E. Huy	<u> 50                                    </u>	
_		
Clernont, F		
. (City/State	and Zip Code)	
For further information concerning this matte	r, please call:	
Mark 6. Valbry (Name of Contact Person)	at (35) 394-0614 ed. 13 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount	:	
\$35 Filing Fee \$\sum \$43.75 Filing Fee & Certificate of Status	43.75 Filing Fee & Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## 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:
	Vallair, Inc.
SECOND:	The document number of the corporation (if known): POY 000053436
THIRD:	The date dissolution was authorized: 10 31 67
	Effective date of dissolution <u>if applicable:</u> (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 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)
	ECRE LAH
	TARY ASSEE
	Signature:  (By a director, president or other officers - 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)
	(Typed or printed name of person signing)
	(Title of person signing)
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Filing Fee: \$35