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SECRETARY OF STATE
TALLAHASSEE FISTATE

16/11/07

COVER LETTER

TO: Amendment Section Division of Corporations		
subject: Dissolute a Corporation		
DOCUMENT NUMBER: P04000075450		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Samuel Diaz (Name of Contact Person)		
(Name of Contact Person)		
SAMBEK INC (Firm/Company)		
11206 Dormer way		
(Address)		
Orlando F1. 32837 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Samuel Diaz at (407) 7589644 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
S35 Filing Fee \$\sum \\$43.75 Filing Fee & \$\sum \\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee.\$ Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (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

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Pursuant to of dissoluti	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on: The name of the corporation as currently filed with the Florida Department of States.
FIRST:	The name of the corporation as currently filed with the Florida Department of States
	SAMBEK INC
SECOND:	The document number of the corporation (if known): P0400075450
THIRD:	The date dissolution was authorized: $6 - 4 - 07$
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)
	(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)
	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)
	Samuel Diaz (Typed or printed name of person signing)
	President/ Secretary
	(Title of person signing)

Filing Fee: \$35

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. This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. SAMBEK INC Name of Corporation: 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: Close of operations Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 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. Samuel Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00