P0400086209

| (Req | uestor's Name) | |
|--------------------------|-----------------|-----------|
| (Addi | ress) | |
| (Addı | ess) | |
| (City/ | State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busi | ness Entity Nan | ne) |
| (Document Number) | | |
| Certified Copies | Certificates | of Status |
| ecial Instructions to Fi | ling Officer: | |
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SECRETARY OF STATE TALLAHASSEE, FLORID

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Vol Dagin

March 23, 2007

ERNESTO E. REYES 6936 SW 110 AVENUE MIAMI, FL 33173

SUBJECT: BDM CONTRACTORS, INC.

Ref. Number: P04000086209

We have received your document for BDM CONTRACTORS, INC., however, upon receipt of your document no check was anclosed. Please send a check or money order payable to the Department of State for \$35.00.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

300

Letter Number: 507A00019851

COVER LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: BDM CONTRACTORS, INC. |
| DOCUMENT NUMBER: P04000086209 |
| The enclosed Articles of Dissolution and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| ERNESTO E REYES |
| (Name of Contact Person) |
| PRESIDENT |
| (Firm/Company) |
| 6936 SW 110 AVE (Address) MIAMI, FL 33173 (City/State and Zip Code) |
| (Address) 의 20 |
| 6936 SW 110 AVE (Address) MIAMI, FL 33173 (City/State and Zip Code) |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| ERNESTO E REYES at (786) 374-3548 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$\sqrt{35}\$ Filing Fee \$\sqrt{\$\sqrt{\$43.75}\$}\$ Filing Fee \$\sqrt{\$\sqrt{\$\sqrt{\$43.75}\$}}\$ Filing Fee \$\sqrt{\$\sq}}}}}}}}}}}}} \end{\sqrt{\$\sqrt{\$\sq}}}}}}}} } } \end{\sqrt{\sqrt{\$\sqrt{\$\sq}}}}}}}} } \end{\sqrt{\$\sqrt{\$\sq}}}}}}} } \ |
| MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section |

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 | of State: | |
|----------|---|---------------------------------------|--|
| | BDM CONTRACTORS INC | | |
| SECOND: | The document number of the corporation (if known): P04000086209 | | |
| ΓHIRD: | The date dissolution was authorized: 09/16/05 | | |
| | Effective date of dissolution if applicable: 01/01/2007 (no more than 90 days after dissolution) | n file date) | |
| FOURTH: | Adoption of Dissolution (CHECK ONE) | | |
| હ | Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval. | for dissolution | |
| | Dissolution was approved by the shareholders through voting groups. | | |
| | The following statement must be separately provided for each voting group to vote separately on the plan to dissolve: | entitled CRE | |
| | The number of votes cast for dissolution was sufficient for approval by | APR -9 PI | |
| | N/A | PM 1: 20 Y OF STATE SEE, FLORIE | |
| | (voting group) | 20 FATE ORIDA | |
| | | • | |
| s | ignature: | | |
| | (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) | | |
| <u>_</u> | ERNESTO E REYES | | |
| • | (Typed or printed name of person signing) | | |
| <u> </u> | PRESIDENT | | |
| | (Title of person signing) | | |

Filing Fee: \$35