ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

FLORIDA STATE WIDE PUBLIC ADJUSTERS, INC.

SECOND: The document number of the corporation: P04000105310

THIRD: The file date of the articles of incorporation: July 15, 2004

FOURTH: None of the corporation's shares have been issued.

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: A majority of the directors authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: DANIEL SELTSER PRESEIDENT

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED Feb 26, 2012 Secretary of State

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.

Name of Corporation:

FLORIDA STATE WIDE PUBLIC ADJUSTERS, INC.

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:

LET THIS SERVE AS FORMAL NOTICE TO THE FLORIDA DEPARTMENT OF STATE/DIVISION OF CORPORATIONS OF THE DISSOLUTION OF FLORIDA STATE WIDE PUBLIC ADJUSTERS INC.

Mailing address where claims can be sent:

246 EAST CORAL TRACE CIRCLE DELRAY, FL 34987

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.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155. Florida Statutes.

Signature: DANIEL SELTSER

Electronic Signature of the Person Filing