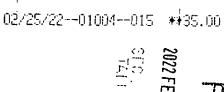
P04000145703

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C. BRUMBLEY

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Tripple Star Corp
DOCUMENT NUMBER: Po 4000 14 57 03
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Kayali C.Co. PA (Firm/Company)
10630 N. 56th St. Ste 201
Tampa, FL 33617
(City/State and Zip Code)
For further information concerning this matter, please call:
OSama Skuyali (HA) at (313) 399-9642 (Name of Contact Person) (Area Code) (Daytime Telephone Number
Enclosed is a check for the following amount:
Sp5 Filing Fee Sp52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Sp5 Filing Fee Sp52.50 Filing Fee, Certificate of Status Sp6 Certificate of Status Sp6 Certified Copy (Additional copy is enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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:
	Tripple Star Corp
SECOND:	The document number of the corporation (if known): Po4000145703
ГНIR D :	The date dissolution was authorized: 1112022
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.
	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) Sabu Tilla
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35