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SECRETARY OF STATE TALLAHASSEE, FLORIGA

COVER LETTER

TO? Amendment Section Division of Corporations
SUBJECT: DISSOLUTION of CORP
DISSOLUTION 2 CORP DOCUMENT NUMBER: PO400155471
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NAN LUECK
(Name of Contact Person) MAMAS FONDELTE # /NC
(Firm/Company) 429 Bay SHORE De
PANAMA Com Boy FL 32407 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Contact Person) at (SD) 2351809 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\infty\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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: Mamost Alberte, NC. The document number of the corporation (if known): SECOND: The file date of the articles of incorporation THIRD: (CHECK AT LEAST ONE BOX) FOURTH: None of the corporation's shares have been issued. The corporation has not commenced business. 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: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. 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.)

Filing Fee: \$35

Title of Person Signing)