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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: DISSOLUTION OF VENGEANCE PAINTBALL DISTIZIBU
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
STEVEN T. DAUIDSON (Name of Contact Person)
(Firm/Company)
PO BOX 1068
PO BOX 1068 (Address)
HILLSBOTZO, NH 03Z44 (City/State and Zin Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
STEVEN DAVIDSON at (339) 227-8607 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$52.50 Filing Fee, \$\bigcom Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, 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 Departme	ent of Si	tate:	
	VENGEANCE PAINTBAIL DISTIRIBUTORS	INC		
SECOND:	The document number of the corporation (if known): DO 4 000/5	6517	2	
THIRD:	The file date of the articles of incorporation: 11/17/2004			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	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 dit to the shareholders, if shares were issued.	istribute	d	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	SECR	10 H	
	A majority of the incorporators authorized the dissolution.	HASS	0 MAY -3	1.286 1.286 1.286
	A majority of the directors authorized the dissolution.	RETARY OF STATE AHASSPE FLORIDA	PH 2: 85	
Signa	ature:			
	By a director, president or other officer - if directors or officers have not been selected, by in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	an incorpor	rator - i	if
	STEVEN J. DAVIDSON (Typed or printed name of person signing)			
	UP OF SALES AND MARKETING— (Title of Person Signing)			

Filing Fee: \$35