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(Re	equestor's Name)	<u>. </u>
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificate	s of Status
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Special Instructions to	Filing Officer	
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COVER LETTER

Division of Corporations			
SUBJECT: DISSOPTION OF C	proporation		
DOCUMENT NUMBER: \$\P\$\p\$\p\$\p\$\p\$\p\$\p\$\p\$\p\$\p\$\p\$\p\$\p\$\p\$			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Volanda M. Rodriguez (Name of Contact Person)			
Triple A+M, Inc. (Firm/Company)			
514 & and Aue. (Address)			
Orange City FL, 32763 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Whanda Rodriguez at (386) 473-3333 (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee Certificate of Status (Additional copy enclosed)	Cee & []\$52.50 Filing Fee, Certificate of Status & V is Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	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 State:			
	Triple A+M, Inc.			
SECOND:	The document number of the corporation (if known): \$\\\\0500000000000000000000000000000000	64760		
THIRD:	The date dissolution was authorized: -3 1709			
	Effective date of dissolution if applicable: 3 17 09 (no more than 90 days after dissolution)	on file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	t 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:	~~		
	The number of votes cast for dissolution was sufficient for approval by	SECRETARY OF ST SIVISION OF CORPOR		
	2	G PI		
	(voting group)	STAL ENS ORATIONS 1 1: 28		
	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)			
	Yolanda Rodriquez			
	(Typed or printed name of person signing)			
	Mesident			
	(Title of person signing)			

Filing Fee: \$35