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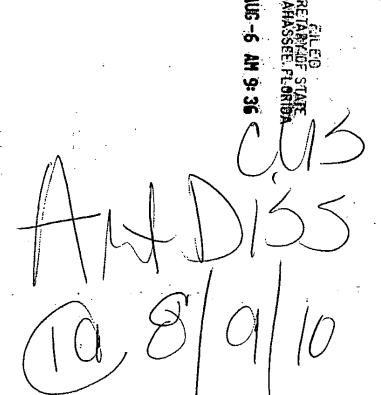
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COVER LETTER

TO: Amendment Section

Division of Corporations SUBJECT: LGM SERVICES, INC. **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following MICHELLE ROSA-GONZALEZ (Name of Contact Person) LGM SERVICES, INC. (Firm/Company) 3598 NW 1ST STREET (Address) MARGATE, FL 33063 (City/State and Zip Code) For further information concerning this matter, please call: MICHELLE ROSA-GONZALEZ (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 3\$35 Filing Fee ✓\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section *Amendment Section **Division of Corporations** Division of Corporations. P.O. Box 6327 Clifton Building Tallahassee, FL 32314 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 Department of State:			
	LGM SERVICES, INC.			
SECOND:	The document number of the corporation (if known):	P05000075938		
THIRD:	The file date of the articles of incorporation: 05/24/2005			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	None of the corporation's shares have been issue	ed.		
	The corporation has not commenced business.	9		
FIFTH:	No debt of the corporation remains unpaid.			
SIXTH:	The net assets of the corporation remaining after winding uto the shareholders, if shares were issued.	p have been distributed		
SEVENTH:	Adoption of Dissolution (CHECK ONE)			
•	A majority of the incorporators authorized the	dissolution.		
	A majority of the directors authorized the disso	lution.		
Sion	eature: Mahalle Howard	$\sqrt{}$		
	(By a director, president or other officer - if directors or officers have no in the hands of a receiver, trustee, or other court appointed fiduciary, by	of been selected, by an incorporator - if that fiduciary.)		
	MICHELLE ROSA-GONZALEZ			
	(Typed or printed name of person signing)	•		
	PRESIDENT			
	(Title of Person Signing)	•		

Filing Fee: \$35