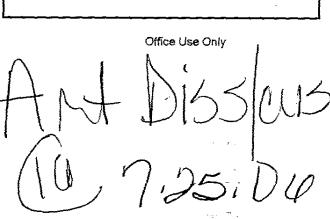
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(Re	questor's Name)	
(Ad	dress)	
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(City	y/State/Zip/Phone	= #)
PICK-UP	MAIT WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to f	iling Officer:	





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THURSTE FLORIDA

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: City Motors Ent Inc.
DOCUMENT NUMBER: P0500081759
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
KRIS MajewSKI (Name of Contact Person)
(Name of Contact I cison)
Aim Financial (Firm/Company)
1730 Wintergreen Blud (Address)
Winter Park H 32792 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (407) 492 5980 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\sum \$\sum \text{\$\sum \text{\$\sin \text{\$\s
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327— Clifton BuildingTallahassee, FL 323142661 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:		
	City Motors Ent Inc.		
SECOND:	The document number of the corporation (if known): PO500081759		
THIRD:	The date dissolution was authorized: 630/06		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.		
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:		
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
	S Wal		
	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)		
	Sanaa Walt		
-	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

Filing Fee: \$35