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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	Articles	of Disa	solution Secti	ion 607.1401	
DOCUMENT	NUMBER: _				
The enclosed A	rticles of Disso	olution and	I fee are submitted fo	or filing.	
Please return all	correspondence	ce concerni	ing this matter to the	following:	
	Sean M	likels			
		(Name c	of Contact Person)		
	Ashle	ee Servi	ces, Inc		
		(Fi	rm/Company)	***	
	1357	Neptun	e Road		
		(Address)		
	Kiss	simmee,	FL 34744		
		(City/S	tate and Zip Code)	 	
For further infor	mation concer	ning this m	natter, please call:		
Sean Mik	els		at (_407		
(Name	e of Contact Pe	erson)	(Area C	ode & Daytime Telephone Number))
Enclosed is a che	eck for the foll	lowing amo	ount:		
✓\$35 Filing Fed		iling Fee & e of Status	\$43.75 Filing F Certified Copy (Additional copy enclosed)	ee & \$\sumsymbol{\sumsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\sun}\sin\sin\sin\sin\sin\sin\sin\sin\sin\sin	
	G ADDRESS:			STREET ADDRESS:	
	ent Section of Corporation	ne		Amendment Section Division of Corporations	
P.O. Box	•	เมอ		Clifton 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: The name of the corporation as currently filed with the Florida Department of State: Ashlee Services, Inc.

SECOND: The document number of the corporation (if known): P06000011239 THIRD: The file date of the articles of incorporation: __01/23/2006 FOURTH: (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. The corporation has not commenced business.

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.

Signature:

FIRST:

FIFTH:

(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.)

Sean Mikels

(Typed or printed name of person signing)

President

(Title of Person Signing)

Filing Fee: \$35