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SECRETAN/ OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Dissolve Corporation			
DOCUMENT NUMBER: P0600055625			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Caesar Bacacella			
(Name of Contact Person) Everlast Racing Inc (Firm/Company)			
9833 Palma Vista Way			
Boca Raton, FL. 33428			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Caesar bacarella at (561) 261-0291 (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$\bigcup \\$35 \text{ Filing Fee & \$\bigcup \\$43.75 \text{ Filing Fee & \$\bigcup \\$52.50 \text{ Filing Fee, } \\ Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)			
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations 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:

FIRST:	The name of the corporation as currently filed with the Florida Department of Sta	ite:		
	Everlast Kacing, Inc.			٠
SECOND:	The document number of the corporation (if known): POLOOO55	62	5	
THIRD:	The file date of the articles of incorporation: 41906			
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 distributed to the shareholders, if shares were issued.			
SEVENTH:	: Adoption of Dissolution (CHECK ONE)	SEC	07 APR	
	A majority of the incorporators authorized the dissolution.	(M)	₹ 26	
	A majority of the directors authorized the dissolution.	ਜੋ⊆; ਜੁ≤;		T
		STATE	င္ဟာ ငာ	
		>'''	ŲΣ	
Sian	nature:			
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an incorpora in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	itor - if		
	Caesar Bararella			
	(Typed or printed name of person signing)			
	<u> </u>			
	(Title of Person Signing)			

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.