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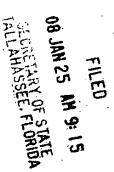
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COVER LETTER

Division of Corporations
subject: Corporate Dissolution
DOCUMENT NUMBER: PO70000035354
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jamie Lee Pierce (Name of Contact Person)
Tri Carry Construction - Demolitron Inc. (Firm/Company)
3345 Okerchobee Road (Address)
Fort Pierce, FZ. 34947 (City/State and Zip Code)
For further information concerning this matter, please call:
Tonie Lee Pierce at (778) 465-5404 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, \$\bigcup \\$Certificate of Status & \$\bigcup \\$Certificate of Status & \$\bigcup \\$Certified Copy & \$\bigcup \\$Certified Cop
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF DISSOLUTION

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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:		
	Tri-County Construction: Demolition Inc		
SECOND:	The document number of the corporation (if known): POTO0005354		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: 0\100\00000000000000000000000000000000		
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)		
	Signature: (By a director, precident 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) Tombe Lee Pierce (Typed or printed name of person signing)		
	President (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. tion: Demolition, Inc. 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.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00