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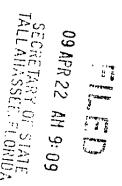
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رزانی C.COULLIETTE

APR 24 2009

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: THE SILVER TOUCH SERVICES INC		
DOCUMENT NUMBER: \$\frac{p 07 0000 8370 \text{8}}{20000 8370 \text{8}}\$		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Catherine Schleiffarth (Name of Contact Person)		
The Silver Touch Cervices lass.		
The Silver Touch Services INC (Firm/Company)		
705 Grane Prairie Way (Address)		
Osprey, FL 34229 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Catherine Schleiffarth at (941) 2289654 (Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$\bigsquare\text{\$43.75 Filing Fee & \$\bigsquare\text{\$43.75 Filing Fee & \$\text{\$52.50 Filing Fee,} \\ Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)		
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton 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:
	The Silver Touch Services
SECOND:	The document number of the corporation (if known): PO7 00008370 8
THIRD:	The date dissolution was authorized: APRIL 18, 2009
	Effective date of dissolution if applicable: APRIL 18, 2009 (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)
	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)
	Catherine Schleiffarth (Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35