## P07000104246

| (Re                                     | equestor's Name)  |           |  |  |
|---|-------------------|-----------|--|--|
| (Ad                                     | ldress)           |           |  |  |
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| (City/State/Zip/Phone #)                |                   |           |  |  |
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SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section

| Division of Corporations   |   |  |  |  |  |
|--|---|--|--|--|--|
| SUBJECT: STARBRIGHT CORPORATION  |   |  |  |  |  |
|  |   |  |  |  |  |
| DOCUMENT NUMBER: P07000104246  |   |  |  |  |  |
| The enclosed Articles of Dissolution and fee are submitted                                   | for filing.   |  |  |  |  |
| Please return all correspondence concerning this matter to t                                 | he following:   |  |  |  |  |
| HENRY COSTA  |   |  |  |  |  |
| (Name of Contact Person)   |   |  |  |  |  |
|  |   |  |  |  |  |
| (Firm/Company)   |   |  |  |  |  |
| 210 SW 107 AVE   |   |  |  |  |  |
| (Address)  | •   |  |  |  |  |
| MIAMI FL 33174   |   |  |  |  |  |
| (City/State and Zip Code   | *)  |  |  |  |  |
| For further information concerning this matter, please call:                                 |   |  |  |  |  |
| HENRY COSTA at (_305   | 222-2289  |  |  |  |  |
| (Name of Contact Person) (Area   | a Code & Daytime Telephone Number)  |  |  |  |  |
| Enclosed is a check for the following amount:  |   |  |  |  |  |
| ▼\$35 Filing Fee ■\$43.75 Filing Fee & ■\$43.75 Filing Certified Cop (Additional controlled) |   |  |  |  |  |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327                    | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building |  |  |  |  |
| Tallahassee, FL 32314  | 2661 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 Departmen  | nt of Sta                   | ite:        |         |  |  |
|---------|--|-----------------------------|-------------|---------|--|--|
|         | STARBRIGHT CORPORATION   | _                           |             |         |  |  |
| SECOND: | The document number of the corporation (if known): P07000104246  |                             |             |         |  |  |
| THIRD:  | The date dissolution was authorized: 05/07/2009  |                             |             |         |  |  |
|         | Effective date of dissolution if applicable: 05/07/2009  (no more than 90 days after dissolution)  | tion file d                 | late)       | _       |  |  |
| FOURTH: | Adoption of Dissolution (CHECK ONE)  |                             |             |         |  |  |
|         | Dissolution was approved by the shareholders. The number of votes ca was sufficient for approval.  | ast for c                   | lissolut    | ion     |  |  |
|         | 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  | SECK!<br>TALLA              | 2009 MAY 11 | - ಎರಡ್ನ |  |  |
|         | (voting group)   | ETARY OF STA<br>HASSEE, FLO | AY 11 PM 3: |         |  |  |
|         | Signature:  (By a director, predident 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. It that (fiduciary) |                             | <b>.</b>    |         |  |  |
|         | LOURDES CHOI   |                             |             |         |  |  |
|         | (Typed or printed name of person signing)  | _                           |             |         |  |  |
|         | PRESIDENT  |                             |             |         |  |  |
|         | (Title of person signing)  | _                           |             |         |  |  |

Filing Fee: \$35