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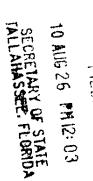
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VOLO SIDO



TO: Amendment Section Division of Corporations

	•		
NAME OF COR	PORATION: Expert	- Decisions I	uc.
DOCUMENT N	JMBER:		
The enclosed Arti	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning thi	is matter to the following:	
	Robert	GiLL of Contact Person)	
	Expert D	Decisions rm/Company)	· · · · · · · · · · · · · · · · · · ·
	1000 NW 17	th Ave. (Address)	·
	Boca Rate (City/s	tate and Zip Code)	86
For further inform	ation concerning this matter,	please call:	
Rob	e of Contact Person)	at (<u>281</u>) <u>20</u>	2-7438 e Telephone Number)
Enclosed is a chec	k for the following amount:		
☑\$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mailing A</u> Amendmer		Street Address Amendment Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ROBERT GILL 1000 NW 17th Avenue Boca Raton, FL 33486

TO Homend Scot. FROM & Gill
FAX#_856-245-6897 PHONE (281)202-7635 FAX (561) 997-5974
DATE 8-26-10
TOTAL PAGES INC COVER
Please disdue this Corp. The city of Boca Raton needs proof it no
longer exsists-Thankiyou

PRIVACY NOTICE FOR FAX COVER SHEET.

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Robert Gill IMMEDIATELY AT (281)-202-7635 TO ARRANGE FOR THEIR RETURN AND DESTROY ALL COPIES OF THIS MESSAGE.

COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT: DISOIVE COSP
DOCUMENT NUMBER: P07000108969
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Robert Gill (Name of Contact Person)
Expert Decisions Inc. (Firm/Company) (Address)
_1000 NW 17th Are
(Address) Boca Raton, FC 33480 (City/State and Zip Code)
For further information concerning this matter, please call:
Robert Gill at (281) 202 7438 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) CASTER COPY (Additional copy is enclosed) CASTER COPY (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 State:
	Expert Decisions, Inc
SECOND:	The document number of the corporation (if known): PO 7000 689 49
THIRD:	The file date of the articles of incorporation: 10 2 07
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)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: Robert Bill (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.)
	(Typed or printed name of person signing)
	(Title of Person Signing)

Filing Fee: \$35