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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Closing of Company
DOCUMENT NUMBER: P08000093699
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
KIM MI KI HCA (Name of Contact Person)
orlandoscape, Inc.
(Firm/Company)
628 First Cape Coval DR. (Address)
Winter Garden, Fl 34787 (City/State and Zip Code)
For further information concerning this matter, please call:
KIM Mi Ki HKA at (407) 576 620 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Stiling Fee \$\sum_{\parabolder}\$43.75 Filing Fee & \$\sum_{\parabolder}\$43.75 Filing Fee & \$\sum_{\parabolder}\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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:	
	Orlandoscape, Inc.	
SECOND:	The document number of the corporation (if known): POSOOO93(099	
THIRD:	The file date of the articles of incorporation: 10/16/2008	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued. Company Cl	osed 2/11/2
	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.	SEC T A LI
SEVENTH:	Adoption of Dissolution (CHECK ONE)	AHA
	A majority of the incorporators authorized the dissolution.	RY OF SSEE.
	A majority of the directors authorized the dissolution.	FLORIDA
Sign	ature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	- if
	(Typed or printed name of person signing)	
	President (Title of Person Signing)	

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. 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: has closed as of Feb 1,2012 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.