PD8000110135

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TALLAHASSEE, FLORIDA

COVER LETTER

TO! Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: Narpaul Outar, Inc. DOCUMENT NUMBER: P08000110135 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Roland Outar (Name of Contact Person) (Firm/Company) 2516 Tall Maple Loop (Address) Ocoee, Florida 34761 (City/State and Zip Code) For further information concerning this matter, please call: at (321) 377-5328

(Area Code & Daytime Telephone Number) Roland Outar (Name of Contact Person) Enclosed is a check for the following amount: \$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & \$\sum \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 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 Department of State:			
	Narpaul Outar, Inc.			
SECOND:	The document number of the corporation (if known): P0800011013.5			
THIRD:	The date dissolution was authorized: $\frac{1/01/2010}{}$			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution	i file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution		
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	entitled		
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)	TAE:		
	Signature: Outo	ECRETARY OF STA		
	(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)	STATE LORIDA		
	Narpaul Outar, Inc.			
	(Typed or printed name of person signing)			
	PD			
	(Title of person signing)			

Filing Fee: \$35