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COVER LETTER

SUBJECT: Mobile Solutions Tampa, Inc. DOCUMENT NUMBER: P10000053980 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Eric Wells (Name of Contact Person) Mobile Solutions Tampa, Inc. (Firm/Company) 7111 N Blue Angel Parkway, #1104 (Address) Pensacola, FL 32526 (City/State and Zip Code) For further information concerning this matter, please call: (Name of Contact Person) Eric Wells (Name of Contact Person) Enclosed is a check for the following amount: [7]\$35 Filing Fee \$\Bigcup \$43.75 \text{ Filing Fee & Certified Copy (Additional copy is enclosed)} (Additional copy is enclosed) MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Ciffon Building	TO: Amendment Section Division of Corporations		
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Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314	2661 Executive Center Circle	

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:	
	Mobile Solutions Tampa, Inc.	
SECOND:	The document number of the corporation (if known): P10000053980	
THIRD:	The file date of the articles of incorporation: 6/28/2010	
FOURTH:	(CHECK AT LEAST ONE BOX)	110
	None of the corporation's shares have been issued.	11 OCT -5 AMII: 54
	The corporation has not commenced business.	5 AM
FIFTH:	No debt of the corporation remains unpaid.	=:5
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	5
SEVENTH:	: Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	nature:	
	(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
	Eric Wells	
	(Typed or printed name of person signing)	
	President (Title of Person Signing)	
	(Title of Leison Signing)	

Filing Fee: \$35