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DRETARY OF STATE

AMASSEE FLORIN

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: CORPORATION DISSOLUTION	
DOCUMENT NUMBER: P11000033694	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
CHRISTOPHER CODY	
(Name of Contact Person)	
(Firm/Company)	
398 BUSHY HILL RD	
(Address)	
SIMSBURY, CT 06070	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
CHRISTOPHER CODYat (860) 623-2203	
(Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
■ \$35 Filing Fee U \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) ■ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:

SECOND:	The document number of the corporation (if known): P11000033694		
THIRD:	The date dissolution was authorized: SEPTEMBER 10, 2013		
	Effective date of dissolution if applicable: OCTOBER 31, 2013 (no more than 90 days after dissolution file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.		
	☐ Dissolution was approved by the shareholders through voting groups.	į.	
	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		
	COMMON STOCK SHAREHOLDERS (voting group) (voting group)		
	(voting group) DA		
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the bonds of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	CHRISTOPHER CODY		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35

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.

Name of Corporation: BLACK SHARK FREIGHT BROKERS, INC.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
NATURE AND AMOUNT OF CLAIM, NAME AND ADDRESS OF
CLAIMANT.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
CHRISTOPHER CODY
RJS, INC.
PO BOX 3261
WINDSOR LOCKS, CT 06096-3261
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.
CHRISTOPHER CODY & Coly
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00