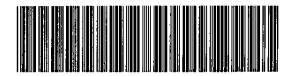
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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: PADC, INC.		
DOCUMENT NUMBER: P11000069	9958	
The enclosed Articles of Dissolution and fe	ee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
LANG T VO		
(Name of C	Contact Person)	
PADC, INC		
(Firm/Company)		
4115 E BUSCH BLVD		
(Ad	ldress)	
TAMPA, FL 33617		
(City/State	e and Zip Code)	
For further information concerning this matt	ter, please call:	
LANG T VO (Name of Contact Person)	at (813)	
Enclosed is a check for the following amoun	nt: ´	
	\$43.75 Filing Fee & \$\Bigsquare\text{\$\sumsquare}\$\$\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$\text{\$\sumsquare}\$\$\$ (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:
	PADC, INC.
SECOND:	The document number of the corporation (if known): P11000069958
THIRD:	The file date of the articles of incorporation: 08/04/11
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.
	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.
Signa	A majority of the directors authorized the dissolution. (By a director, president prother 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.)
	LANG T. VO
	(Typed or printed name of person signing)
	REGISTERED AGENT (Title of Person Signing)

Filing Fee: \$35