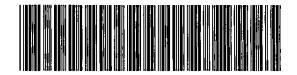


(Re	questor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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OCT 23 2013 R. WHITE



COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of Ebidcar,	, Inc
DOCUMENT NUMBER: P1200004445	4
The enclosed Articles of Dissolution and fee are submitted	ed for filing.
Please return all correspondence concerning this matter to	the following:
Tom Capocefalo	
(Name of Contact Person	n)
Ebidcar, Inc.	
(Firm/Company)	
495 Brickell Ave., Suite 3309)
(Address)	
Miami, FL 33131	
(City/State and Zip Coo	de)
For further information concerning this matter, please call	1:
	54 ₎ 873-5279
(Name of Contact Person) (Ar	rea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status Certified Conditional 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	Ctota:		
IKDI.	Ebidcar, Inc	State.		
SECOND:	The document number of the corporation (if known): P12000044454			
THIRD:	The file date of the articles of incorporation: 5/11/2012			
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.			
SIXTH:	The net assets of the corporation remaining after winding up have been distribute to the shareholders, if shares were issued.	SE CRE	36	Ť
SEVENTH:	Adoption of Dissolution (CHECK ONE)	7 52	1 15	
	☐ A majority of the incorporators authorized the dissolution.	一声或 四次	P	
	A majority of the directors authorized the dissolution.	OF THE STATE OF TH	1:19	
Sign	nature:			
	By a director, president or other officer - if directors or officers have not been selected, by an incomin the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	rporator - if		
	Dale Abbott			
	(Typed or printed name of person signing)			
	Director			
	(Title of Person Signing)			

Filing Fee: \$35