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(Ac	ldress)			
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(Ci	ty/State/Zip/Phone	= #)		
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JAN 31 2014

R. WHITE

COVER LETTER

* TO: Amendment Section

Division of Corporations			
SUBJECT: Disso	lution		
DOCUMENT NUMBER: P 1300	0031287		
The enclosed Articles of Dissolution and fee	are submitted for filing.		
Please return all correspondence concerning the	nis matter to the following:		
Abilio Santa (Name of Co	<u> </u>		
(Name of Contact Person)			
NJRapp Inc. (Firm/Company)			
(Firm/Company)			
902 N Mark (Addr	ess)		
Wilning ton, D. (City/State a	E / 9801 and Zip Code)		
For further information concerning this matter	, please call:		
Abilio Suntos (Name of Contact Person)	at (305) 316.990/ (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
	\$43.75 Filing Fee & S52.50 Filing Fee, Certified Copy Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS:	STREET ADDRESS:		
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
Tallahassee. FL 32314	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 Departme	ent of Sta	ate:	
	NJRapp Inc.	_		
SECOND:	N1232	1287	7	
THIRD:	The date dissolution was authorized: /- 6-14			
	Effective date of dissolution if applicable: 1-6-14 (no more than 90 days after disso	lution file d	late)	
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes was sufficient for approval.	cast for o	lisso	lutio
	Dissolution was approved by the shareholders through voting groups	i.		
	The following statement must be separately provided for each voting gro to vote separately on the plan to dissolve:	up entitl	ed.	
	The number of votes cast for dissolution was sufficient for approval by		JEN 28	
	Abilio Suntos (voting group)			
	(voting group)		S: 03	
	Signature: Signature:			
	(By a director, president or other officer - if directors or officers have not been selected an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary that fiduciary)	, by , by		
	Abilio San tos (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: NJRapp Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
None
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
902 N. Market St Apt. 1101
902 N. Market St Apt. 1101 Wilmington, DE 19801
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence within 4 years after the filing of this notice.
Abilio Santos Soutis
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