To:

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Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

DISSOLUTION OR WITHDRAWAL CAMACHO IMPACT WINDOWS INC

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$35.00 |

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Corporate Filing Menu

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## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST:  | ST: The name of the corporation as currently filed with the Florida Department of State:  |  |
|---------|---|--|
|         | CAMACHO IMPACT WINDOWS INC  |  |
| SECOND: | The document number of the corporation (if known):  |  |
| THIRD:  | The date dissolution was authorized: 5272   |  |
|         | Effective date of dissolution if applicable:  (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.   |  |
|         | 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   |  |
|         | 7AC 20  |  |
|         | (voting group)  |  |
|         | PESTO AM 8  |  |
|         | Signature:  (By a director, president or other officer - if directors or officers have not been so ected, by an incomporator - if in the hands of a receiver, trustee, or other court appointed induciary, by that fiduciary) |  |
|         | ELISEO CAMACHO  |  |
|         | Typed or printed name of person signing)  P(45) d. 40 +   |  |
|         | (Title of person signing)   |  |

Filing Fee: \$35