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BARRY G. HOFFMAN*
KENNETH R. SEGAL
M. KATHLEEN CLENDINING

*FL & NY BAR

December 18, 1996

DEPARTMENT OF STATE
Division of Corporations
Corporate Records Bureau
409 East Gaines Street
Tallahassee, FL 32301

RE: Articles of Dissolution
Starry Nite, Inc.

Dear Sir/Madam:

Enclosed herewith please find original and one (1) copy of Articles of Dissolution of Starry Nite, Inc.. We are also enclosing a check in the amount of \$35.00, which represents your fee for filing the dissolution.

Please return one (1) conformed copy of the Articles of Incorporation to this office in the stamped-addressed envelope provided for your convenience.

Thank you for your cooperation in this matter. Please feel free to contact this office with any questions or concerns.

Very truly yours,

Alice V. Castelli
ALICE V. CASTELLI
Legal Assistant
Enc. 1

FILED
96 DEC 20 PM 12:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**PLEASE NOTE: THIS MUST BE EFFECTUATED
BEFORE DECEMBER 30, 1996.**

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ARTICLES OF DISSOLUTION
OF
STARRY NITE, INC.

96 DEC 20 PM 12:47

SECRETARY OF STATE
TALLAHASSEE FLORIDA

PURSUANT to the provisions of Section 607.1403 of the Florida Statutes, these Articles of Dissolution provide that:

ARTICLE ONE
NAME OF CORPORATION

The name of the corporation is STARRY NITE, INC. (the "Corporation").

ARTICLE TWO
DATE DISSOLUTION AUTHORIZED

The Dissolution was authorized by the Corporation's shareholders on December 13, 1996.

ARTICLE THREE
SHAREHOLDER APPROVAL

The Dissolution was approved by a majority of the Corporation's shareholders, which is sufficient for dissolution of the Corporation.

IN WITNESS WHEREOF these Articles of Dissolution have been executed on behalf of the Corporation by its duly authorized officer on the 13th day of December, 1996.

STARRY NITE, INC.
a Florida corporation

By: J. Mark Nicholson

President

By: J. Mark Nicholson

Sole Shareholder

Alice V. Castell
witness

[Signature]
witness

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY, that on this day, the foregoing instrument was acknowledged before me by J. Mark Nicholson, who, are/is personally known to me or who have/has produced _____ as identification and who acknowledged before me that he/~~she/they~~ executed the same freely and voluntarily for the purpose therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this 13th day of December, 1996.

Alice V. Castell
Notary Public/State of Florida

My Commission Expires:

