

LAW OFFICES

KIMPTON, BURKE, WHITE & HEIDEN, P.A.

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November 30, 1998

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

800002711299--5  
-12/14/98--01057--003  
\*\*\*\*\*87.50 \*\*\*\*\*43.75

RE: EZ-Golf, Inc.  
Our File No. 10,264.04.6.000

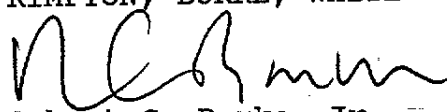
Gentlemen:

Enclosed please find original and photocopy of Articles of Dissolution and Statement of Intent to Dissolve regarding the above referenced corporation.

Further enclosed is a check in the amount of \$87.50 to cover the cost of the filing fee. Please return a certified copy of the Articles of Dissolution after filing.

Sincerely,

KIMPTON, BURKE, WHITE & HEIDEN, P.A.

  
Robert C. Burke, Jr.

RCB/cg  
Enclosures  
cc: Mr. Gary T. Forrest

Dis  
12-28-98  
045

FILED  
98 DEC 14 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

cg:98secr01.ltr

FILED

98 DEC 14 PM 3:16

ARTICLES OF DISSOLUTION  
PURSUANT TO FLORIDA STATUTES 607.1403  
OF THE FLORIDA STATUTES  
OF  
EZ-GOLF, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of 607.1403 of the Florida Statutes, the undersigned corporation adopts the following Articles of Dissolution for the purpose of dissolving the corporation:

1. The name of the corporation is EZ-GOLF, INC.
2. Dissolution was authorized on November 16, 1998
3. The number of shares casting votes in favor of dissolution was sufficient for approval.

DATED: November 16, 1998

EZ-GOLF, INC.

By: Gary T. Forrest  
Gary T. Forrest, President

And: Gary T. Forrest  
Gary T. Forrest, Secretary

(Corporate Seal)

STATE OF FLORIDA  
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 16 day of Nov., 1998 by GARY T. FORREST, as President of EZ-GOLF, INC., a Florida corporation, on behalf of the corporation. He is (☒) personally known to me or has ( ) produced a Florida driver's license as identification.



R. C. Burke, Jr.  
MY COMMISSION # CC634981 EXPIRES  
July 7, 2001  
BONDED THRU TROY FAIN INSURANCE, INC.

R. C. Burke, Jr.  
Notary Public, State of Florida  
Name: \_\_\_\_\_  
Serial No: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_