P95000027356

| (Requestor's Name) |
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| (Address) |
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| (Address) |
| (National) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
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| Codifical Continues of Charles |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE
TAIL AHASSEF FI OBINA

Dissolution

TB 3-20-08

COVER LETTER

| TO: Amendment Section Division of Corporations | |
|---|--|
| | |
| SUBJECT: Corporate Dissolution | |
| P | |
| DOCUMENT NUMBER: 1950000 27356 | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Madeleine D. Longoray P.A. (Name of Contact Person) | |
| , , , , , , , , , , , , , , , , , , , | |
| Low Goray & Desocrates Inc. | |
| (F/rm/Company) | |
| 8360 W Floyler St. f203 (Address) | |
| (Address) | |
| Himi - Pl. 33144 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| (Name of Contact Person) (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amount: | |
| \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$52.50 Filing Fee, Certificate of Status & Certified Copy Certificate of Status & | |
| (Additional copy is Certified Copy | |
| enclosed) (Additional copy is enclosed) | |
| MAILING ADDRESS: | |
| Amendment Section Amendment Section | |
| Division of Corporations Division of Corporations | |
| P.O. Box 6327 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 Department of State: |
|---------|---|
| SECOND: | The document number of the corporation (if known): 1950000 27356 |
| THIRD: | The date dissolution was authorized: 12/01/07 |
| | Effective date of dissolution if applicable: 19/31/07 (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 |
| | The number of votes cast for dissolution was sufficient for approval by TALLAH AH AH AH AH AH AH AH AH A |
| | (voting group) ARY OF STATE SSEE, FLORIDA Henri 12 22 Rad |
| | Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) |
| | Henri Lope 2 (Typed or printed name of person signing) |
| | President Director |
| | (Title of person signing) |

Filing Fee: \$35