| Corporation Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                          |                                                           |                     |                                                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------|---------------------|---------------------------------------------------|
| ACCOUNTING  407 Lincoln Rd., Suite 5-18 CORPORATION Name)  1. (Corporation Name) (Document #)  2. (Corporation Name) (Document #)  3. (Corporation Name) (Document #)  4. (Corporation Name) (Document #)  4. (Corporation Name) (Document #)  Walk in Pick up time Corrified Copy  Mail out Will wait Photocopy Certificate of Status  New Filings  Amendment Resignation of R.A., Officer/ Director  Limited Liability Domestication  Other  SEGISTRATION  Fictitions Name  Name Reservation  Name Reservation  Name Reservation  Name Reservation  Name Reservation  Name Reservation  Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Pac                                      | 60000                                                     | 629                 | E2                                                |
| CORPORATION NAME  CORPORATION NAME  (Corporation Name)  (Corporati |                                          | AND<br>BRITO                                              |                     |                                                   |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | City/ A<br>407<br>Mian<br>CORPORATION IN | Lincoln Rd., Suite 5-B<br>ni Beach, Florida 33139 ENT NUN |                     |                                                   |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2                                        |                                                           | •                   |                                                   |
| Walk in Pick up time Certified Copy  Mail out Will wait Photocopy Certificate of Status  NEW FILINGS  Profit Resignation of R.A., Officer/ Director  Limited Liability Domestication Other  OTHER FILINGS Annual Report Fictitions Name Name Reservation  Name Reservation  Certified Copy Certificate of Status  OCHINGS  AMENDMENTS  Amendment Resignation of R.A., Officer/ Director  Change of Registered Agent Dissolution/Withdrawal  OTHER FILINGS Annual Report Foreign Limited Partnership Reinstatement Trademark Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 3(Corpo                                  | ration Name) (L                                           |                     | 20327515<br>18/96-01086-003<br>**35.00 *****35.00 |
| NEW FILINGS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ☐ Walk in ☐                              | Pick up time                                              | Certified Copy      |                                                   |
| NonProfit  Limited Liability  Domestication  Other  Resignation of R.A., Officer/ Director  Change of Registered Agent  Dissolution/Withdrawal  Merger  REGISTRATION/ OUALIFICATION  Foreign  Limited Partnership  Reinstatement  Trademark  Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | NEW FILINGS                              | AMENDMENTS.                                               |                     |                                                   |
| Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | NonProfit                                | Resignation of R.A., Officer/ Di                          | rector              | 96<br>98                                          |
| Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Other                                    | Merger                                                    |                     | CRETARY IN OF COLUMN                              |
| Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Annual Report                            | QUALIFICATION                                             |                     | O<br>OF STATE<br>RPORATION<br>PHIZ: 374           |
| Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                          | Reinstatement                                             | T.S. T              | 2 3 0 W                                           |
| Examiner's Initials Examiner's Initials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                          |                                                           | Examiner's Initials |                                                   |

N/A

## ARTICLES OF DISSOLUTION

Pursuant to 607.1403, Florida Statutes, the undersigned corporation submits the following articles of dissolution:

The name of the corporation is M.B.P. SOFTBALL CLUB, INC.

The articles of incorporation were filed on July 29, 1996

The dissolution was authorized on: December 02, 1996

Adoption of Dissolution:

Dissolution was approved by "all" the shareholders.the number of votes cast was sufficient for approval.

Signed this 02 day of December, 1996

M.B.P. Softball Club. Inc. corporation name

Ву

(Chairman or Vice Chairman of the Board, President, or other officer)

James Scarberry

(Typed of printed name)

President

(Title)