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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: HABA-DOM CIGARS CORP.	
DOCUMENT NUMBER: P97000051955	
The enclosed Articles of Dissolution and fee are subr	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
Roberto F. Fleitas	
(Name of Contact Pe	rson)
Fleitas, Bujan & Fleitas, LLP	
(Firm/Company	y)
782 NW Le Jeune Road, Suite 530	
(Address)	_
Miami, FL 33126	
(City/State and Zip	Code)
For further information concerning this matter, please	call:
Roberto F. Fleitas at (305) 442-1439
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certifie	nal copy is Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to of dissoluti	section 607.1403, Florida Statutes, this Florida profit corporation subnuts the following article on:
FIRST:	The name of the corporation as currently filed with the Florida Department of States
	HABA-DOM CIGARS CORP.
SECOND:	The document number of the corporation (if known): P97000051955
THIRD:	The date dissolution was authorized: August 4, 2009
	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
	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) Roberto F. Fleitas (Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35