

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Dissolution

DOCUMENT NUMBER: _____

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Angela Bush
(Name of Person)

Gulfstream Financial Services, Inc.
(Name of Firm/Company)

11873 Springs Road Suite #10
(Address)

Coniter CO 80433
(City/State/and Zip Code)

For further information concerning this matter, please call:

Angela Bush at (303) 838-1400
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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 Department of State

HBH Tiffany Corp.

SECOND: The document number of the corporation (if known): _____

THIRD: The date dissolution was authorized: 6-30-2004

Effective date of dissolution if applicable: 6-30-2004
(no more than 90 days after dissolution file date)

FILED
04 JUL 15 PM 4:02
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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 of 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

(voting group)

Signed this _____ day of _____, _____.

Signature: K. Michael Harkey
(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)

K. Michael HARKEY
(Typed or printed name of person signing)

President Director
(Title of person signing)

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: HBH Tiffany Corp.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

1. Person or entity making the claim
2. Amount of claim
3. Contact information of claimant
4. Description of claim and all information regarding the claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Gulfstream Financial Service
11873 Springs Road Suite 10
Conita, CO 80933

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

K. Michael HARKEY
Printed Name of the Person Filing

K. Michael Harkey
Signature of the Person Filing