

P970000084750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

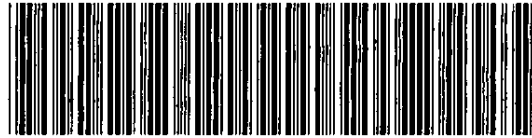
(Business Entity Name)

(Document Number)

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08/21/08--01015--004 **52.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 AUG 21 PM 3:51

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*OK
8/25/08*

KIVISTO LAW FIRM

J.K. Kivisto, Esq.

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Lake Worth, FL 33460-2167

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August 19, 2008

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

RE: Addison Reserve, Inc.
Document # P97000084750

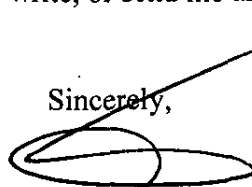
Dear Sirs:

Enclosed please find a original and copy of Articles of Dissolution for Addison Reserve, Inc. to be effective the date of filing, together with our trust account check in the amount of \$ 52.50 (filing fee, certificate of status, and certified copy) payable to the Florida Department of State.

Please return all correspondence to J.K. Kivisto, Esq. at the address set out above.

If you have questions, please call, write, or send me an e-mail.

Sincerely,

A handwritten signature in black ink, consisting of a large, stylized 'J' and 'K' followed by a horizontal stroke.

J.K. Kivisto

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State
Addison Reserve, Inc.

SECOND: The document number of the corporation (if known): P97000084750

THIRD: The date dissolution was authorized: August 19, 2008

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

(voting group)

Signature: McBurney, Eugene
(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)

McBurney, Eugene

(Typed or printed name of person signing)

PSTD

(Title of person signing)

Filing Fee: \$35