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| J | To:   | Division of Corporations                               |            |
|---|-------|--|------------|
| l |       | Fax Number : (850)617-6380                             | =          |
|   |       |  | U)         |
|   | From: |  | (7)<br>(7) |
|   |       | Account Name : LAW OFFICES OF MICHAEL A. HALBERG, P.A. | Ĺī,        |
|   |       | Account Number : I20100000044                          | ÷,-        |
|   | •     | Phone : (954)252-0589                                  | 777        |
|   |       | Fax Number : (954)320-4555                             | 7          |
|   |       |  | £          |

## DISSOLUTION OR WITHDRAWAL SCANDINAVIAN BOILER REPAIR, INC.

| Certificate of Status | 1       |
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## 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:  |
|---------|---|
|         | SCANDINAVIAN BOILER REPAIR, INC.  |
| SECOND: | The document number of the corporation (if known):  |
| THIRD:  | The date dissolution was authorized:  |
|         | Effective date of dissolution if applicable:  (no more than 90 days after dissolution file date)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will         |
| FOURTH: | not be listed as the document's effective date on the Department of State's records.  Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.                 |
|         | 22 AM 6: 06 SSEE, FLEXIBLE  |
|         | 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) |
|         | Tham Yew Hong   |
|         | (Typed or printed name of person signing)   |
|         | President/CEO   |
|         | (Title of person signing)   |

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