

P98000065745

CT CORPORATION SYSTEM

CORPORATION(S) NAME

LKQ Florida, Inc.

01 APR 16 PM 12:28
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

40000398444-0
04/10/01 01041-009
*****35.00 *****35.00

- | | | |
|--|--|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input type="checkbox"/> Foreign | <input checked="" type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 APR 10 AM 11:14
NOT RETURNED
TO AGENCY/LEDGE
SUFFICIENCY OF FILING

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

4/10/01

Order#: 4040063

Ref#: _____

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

G. GOULLIETTE APR 16 2001



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 10, 2001

CT CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: LKQ FLORIDA, INC.
Ref. Number: P98000065745

We have received your document for LKQ FLORIDA, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 901A00021239

RECEIVED
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DIVISION OF CORPORATION

ARTICLES OF DISSOLUTION

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

FIRST: The name of the corporation is LKO Florida, Inc.

SECOND: The date dissolution was authorized: March 9, 2001

THIRD: Adoption of Dissolution (check one)

Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

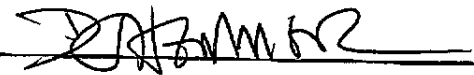
Dissolution was approved by vote of the shareholders through voting groups.

[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)

FILED
01 APR 16 PM 12:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 11th day of April, 2001


Signature
(By the Chairman or Vice Chairman of the Board, President, or other officer)
Daniel J. Hemmer
(Typed or Printed Name)
Secretary
(Title)