P9800/08389

| (Re | equestor's Name) | |
|-------------------------|-----------------------|-------|
| (Ad | ddress) | · |
| (Ac | ddress) | |
| · (Ci | ty/State/Zip/Phone #) | |
| PICK-UP | ☐ WAIT | MAIL |
| (Bi | usiness Entity Name) | |
| (Document Number) | | |
| Certified Copies | Certificates of S | tatus |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
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| | | |

Office Use Only



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C. CARROTHERS

BIOS I S AAM



Eastham Law Offices

138 West Palmetto Park Road Boca Raton, FL 33432

Telephone: (561) 395-6800 Fax: (561) 391-6902

emjeastham@easthamlawoffices.com

JOHN K. EASTHAM, JR. ERIK IAN EASTHAM

Of Counsel David Rich

March 24, 2016

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Dissolution Document for Howellgate, Inc.

Dear Sir/Madam:

Enclosed is the dissolution form for Howellgate, Inc., along with a check for the filing fees.

If you have any questions or concerns, please contact me at (561) 395-6800.

Sincerely,

Cathy Wending Legal Assistant

/cw

cc: client enclosure(s)

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COVER LETTER

| TO: Amendment Section Division of Corporations | |
|---|---|
| SUBJECT: Dissolving Comp | any |
| DOCUMENT NUMBER: P980001 | 08389 |
| The enclosed Articles of Dissolution and fee | are submitted for filing. |
| Please return all correspondence concerning the | nis matter to the following: |
| EriKI. Easthan | |
| (Name of Co | ntact Person) |
| Eastham Law of | fices PA |
| (Firm/C | Company) |
| 138 W. Painett | o fork Rd |
| (Add | ress) |
| Boca Roton, | FL 33432 |
| | and Zip Code) |
| For further information concerning this matte | r, please call: |
| EVIK I. Eastham | at (561) 395 - 6800 |
| (Name of Contact Person) | (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount | |
| Certificate of Status | 1 \$43.75 Filing Fee & ☐ \$52.50 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, FL 32314 | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle |

Tallahassee, FL 32301

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: | | |
|---------|--|--|--|
| | Howellgate, Inc. | | |
| SECOND: | The document number of the corporation (if known): P.98000/0 8389 | | |
| THIRD: | The date dissolution was authorized: 3-4-2014 | | |
| | Effective date of dissolution if applicable: 3-4-2014 | | |
| | (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 not be listed as the document's effective date on the Department of State's records. | | |
| 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: (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) (Typed or printed name of person signing) | | |
| | (Title of person signing) | | |