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TRANSMITTAL LETTER

SUBJECT: Four Star Title, Luc. DOCUMENT NUMBER: P19000 38439 The enclosed Articles of Dissolution and fee are submitted for filling. Please return all correspondence concerning this matter to the following: (Name of Person) (Name of Firm/Company) 1761 W. Hills 600 Bluel 4104 (Address) Deer field Beach, FL 33442 (City/State/and Zip Code) For further information concerning this matter, please call: (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: (Additional copy is enclosed) (Additional copy is enclosed) MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6372 (April S. STREET ADDRESS: Amendment Section Division of Corporations P.O. Box 6372 (April S. STREET ADDRESS: Amendment Section Division of Corporations Division of Corporations P.O. Box 6372 (April S. STREET ADDRESS: Amendment Section Division of Corporations Division of Corporations P.O. Box 6372 (April S. STREET ADDRESS: Amendment Section Division of Corporations P.O. Box 6372	TO: Amendment Section Division of Corporations		
The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Person) Gary M. Mills, P. A. (Name of Firm/Company) 1761 W. Hills 600 Bluel. #104 (Address) Deer Lie Id Beach, PL 33442 (City/State/and Zip Code) For further information concerning this matter, please call: at (JSH) 427-4228 (Name of Person) Enclosed is a check for the following amount: #1\$35 Filing Fee \$\frac{1}{2}\$	SUBJECT: Four Star Title, Inc.		
Construction Cons	DOCUMENT NUMBER:		
(Name of Person) Cary M. Mills, P. A. (Name of Firm/Company) 176/ W. Hillsboro Blud. 4/04 (Address) Deer Field Beach, FL 33442 (City/State/and Zip Code) For further information concerning this matter, please call: Cary Mills	The enclosed Articles of Dissolution and fee are submitted for filing.		
Cary M. Mills, P. A. (Name of Firm/Company) 176 W. Hills 600 Blood Aloy (Address) Deer field Beach, Fl. 33442 (City/State/and Zip Code) For further information concerning this matter, please call: Cary Mills	Please return all correspondence concerning this matter to the following:		
Cary M. Mills, P. A. (Name of Firm/Company) 176 W. Hills 600 Blood Aloy (Address) Deer field Beach, Fl. 33442 (City/State/and Zip Code) For further information concerning this matter, please call: Cary Mills			
Deer Cield Beach, FC 33442 City/State/and Zip Code	(Name of Person)		
Deer Cield Beach, FC 33442 City/State/and Zip Code	Gary M. Mills P. A.		
Deer Cield Beach, FC 33442 City/State/and Zip Code	(Name of Firm/Company)		
Deer Cield Beach, FC 33442 City/State/and Zip Code	1761 W. Hillsbord Blud. #104		
For further information concerning this matter, please call: Gary Mi' S			
Cary Mi'/ S at (954) 427-4228 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Status	(City/State/and Zip Code)		
Enclosed is a check for the following amount: Status Status	For further information concerning this matter, please call:		
Enclosed is a check for the following amount: Status Status	Gary Mills at (954) 427-4228		
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) **MAILING ADDRESS:** Amendment Section Division of Corporations **Division of Corporations** **Division of Status & Certified Copy (Additional copy is enclosed) **STREET ADDRESS:** Amendment Section Division of Corporations	(Name of Person) (Area Code & Daytime Telephone Number)		
Certificate of Status (Additional copy is Certified Copy enclosed) (Additional copy is certified Copy enclosed) (Additional copy is enclosed) (Additional copy is enclosed) (Additional copy is enclosed) (Additional copy is enclosed) STREET ADDRESS: Amendment Section Division of Corporations Division of Corporations	Enclosed is a check for the following amount:		
Amendment Section Amendment Section Division of Corporations Division of Corporations	Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed) Certified Copy (Additional copy is		
Division of Corporations Division of Corporations			
P.O. Box 6327 409 F. Gaines Street			
Tallahassee, Florida 32314 Tallahassee, Florida 32399	P.O. Box 6327 409 E. Gaines Street Tallahassee, Florida 32314 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:
	Four-Star Title, Inc
SECOND:	The document number of the corporation (if known): P99000 38439
THIRD:	The date dissolution was authorized: 9/7/04
	Effective date of dissolution if applicable: date of receipt (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 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
	PAR PAR T
	(voting group)
	Signed this day of,
Signat	ure: Lawrendy President
_	(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)
	(Typed or printed name of person signing)
	(Title of person signing)

Filing Fee: \$35