

P99000052093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

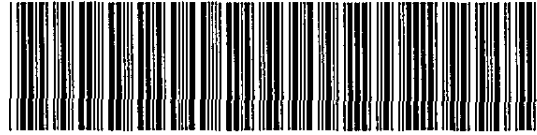
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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T. Lewis*

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Board Certified Civil Trial Lawyer

*Also Admitted in Conn., Mass

Of Counsel
Marc A.B. Silverman
Bruce J. Robbins+

+Also Admitted in New York, Colorado

July 27, 2005

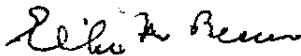
Florida Department of State
Amendment Section
Division of Corporation
P.O. Box 6327
Clearwater, FL 32314

Re: S.T. Masters, Inc.

Gentlemen:

Enclosed herewith please find Articles of Dissolution of S.T. Masters, Inc., together with a check of that corporation in the amount of \$35.00 for your fee.

Very truly yours,



Elihu H. Berman
EHB/ds
Enclosure
cc: Client

ARTICLES OF DISSOLUTION

Pursuant to § 607.1043, 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:

S.T. MASTERS, INC.

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

P99000052093

THIRD: The date dissolution was authorized:

June 6th

Effective date of dissolution if applicable:

(no more than 90 days after dissolution the 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)

Signed this 02nd day of July, 2005

Signature: _____

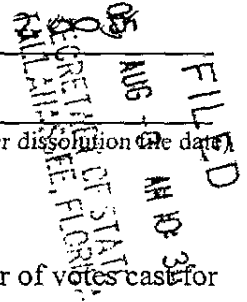
(by a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary)

MARCO ALAMINA

(Typed or printed name of person signing)

Pres.

(Title of person signing)



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MARCO ALAMINA
(Typed or printed name of person signing)

PRES.
(Title of person signing)

Filing Fee: \$35

FILED
AUG - 3
10: 34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA