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SECRETARY OF STATE
ALLAHASSEE, FLORID

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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Capital City Collision Center, Inc.		
DOCUMENT NUMBER: S43725		
The enclosed Articles of Dissolution and fee are submitte	d for filing.	
Please return all correspondence concerning this matter to	the following:	
Frances Lowe		
(Name of Contact Person		
Frances Casey Lowe, P.A.		
(Firm/Company)		
3042 Crawfordville Highway		
(Address)		
Crawfordville, Florida 32327		
(City/State and Zip Cod	e)	
For further information concerning this matter, please call	:	
Frances Lowe at (_850	926-8245	
(Name of Contact Person) (Are	ea Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\bigcup \$43.75 Filing Fee & \$	4.7	
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:		
	Capital City Collision Center, Inc.		
SECOND:	The document number of the corporation (if known): S43725		
THIRD:	The date dissolution was authorized: July 17, 2008		
	Effective date of dissolution <u>if applicable:</u> July 17, 2008 (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 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)		
	(voting group) HASSEE, FLO		
	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)		
	Danny Hollon		
	(Typed or printed name of person signing)		
	Sole Shareholder/Director/President (Title of person signing)		
	(TRIC OF DEISON SIGNING)		

Filing Fee: \$35

UNANIMOUS WRITTEN COMSENT FOR DISSOLUTION OF CAPITAL CITY COLLISION, INC.

The undersigned, being the Sole Shareholder and Director/President of Capital City Collision, Inc. a Florida corporation (the "Corporation"), hereby consents to the dissolution of the Corporation in accordance with Section 607.1402, Florida Statutes:

WHEREAS, the undersigned has determined that it is in the his best interest and for the business that the assets and liabilities of the Corporation be transferred to him as an individual and, the Corporation be dissolved;

KNOW THEREFORE, the undersigned is to perform the following actions to finalize the transfer and dissolution:

- (1.) Prepare and file Articles of Dissolution with the Florida Department of State Division of Corporation;
- (2.) Wind down all remaining business affairs of the Corporation no later than July 15, 2008;
- (3.) Discharge all liabilities of the Corporation;
- (4.) Distribute remaining assets of the Corporation to the undersigned; and
- (5.) Do any other acts necessary to wind up and liquidate the Corporation's business and affairs.

IN WITNESS WHEREOF, the undersigned has duly executed this Consent effective as of July $\underline{\mathcal{I}}_-$, 2008.

Danny Hollon, Sole Shareholder/Director/President