H. James Lentz\* Andrea M. Fair

\*Washington, D.C. Bar \*Colorado Bar \*Federal Court

\*Licensed Architect

\*Certified General Contractor

LENTZ & FAIR, P.A.

35111 U.S. Highway 19 North Suite 302 Palm Harbor, Florida 34684 (813) 787-8700 Fax: (813) 789-6275

South Florida Offices

28 West Flagler Street Eleventh Floor Miami, Florida 33130 (305) 579-4766

Please Reply To: Palm Harbor

February 7, 1997

State of Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

\*\*\*\*\*35.00 \*\*\*\*\*35.00

Long Shadow Inc. Re:

Dear Sir/Madam:

Enclosed find original Articles of Dissolution and check in the amount of \$35.00. Kindly file same.

If you have any questions, contact my office. Thank you.

Yours truly,

& FAIR, P.A.

Attomy at Law

/sac

Enclosures

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FILED FIGHERY OF STATE OF CORPORATION:

97 FEB 17 AM 10: 09

## ARTICLES OF DISSOLUTION FOR LONG SHADOW INC.

PILED
DIVISION OF CONTRACTO
97 FEB 17 AM 10: 09

Name

The name of the corporation being dissolved is Long Shadow Inc., document number S58430, filed on June 10, 1991.

Date Dissolution Authorized

The date dissolution of Long Shadow Inc. was authorized was January 10, 1997.

Shareholders Vote for Dissolution

By joint meeting of 100% of the directors and 100% of the shareholders of Long Shadow Inc., the shareholders unanimously voted to dissolve Long Shadow Inc. on January 10, 1997.

Sufficient Vote for Dissolution

Voting by group was not required and 100% of the shareholders having voted was sufficient for approval to dissolve Long Shadow Inc.

Effective Date

The effective date for Long Shadow Inc. to be dissolved shall be January 10, 1997.

Anthony Trimarco

Treasurer on Behalf of

Long Shadow Inc.

Attest to By

Susan P. Lentz

Secretary

STATE OF FLORIDA COUNTY OF PINELLAS

I HEREBY CERTIFY that on this day, before me an officer duly authorized in the State of Florida and in the County of Pinellas to take acknowledgments, personally appeared ANTHONY TRIMARCO to me personally known (or identified by his driver's license) to be the person described in and who executed the foregoing document, and severally acknowledged before me that he executed the same as his free act and deed for the uses and purposes therein stated.

WITNESS my hand and official seal in the County and State last aforesaid this

lay of February A.D. 1997

Notary Public

My Commission Expires:

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