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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name

: THOMAS V. SICILIANO, P.A.

Account Number: I2000000144 Phone

: (561)338-9990

Fax Number

: (561)338-3441

## DISSOLUTION

## DAMASCUS INDUSTRIES, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

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## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST:           | IRST: The name of the corporation as currently filed with the Department of State:  |  |
|------------------|---|--|
|                  | DAMASCUS INDUSTRIES, INC.   |  |
| SECOND:          | The document number of the corporation (if known); \$86804  |  |
| THIRD:           | The date dissolution was authorized: JANUARY 28, 2005   |  |
|                  | Effective date of dissolution if applicable: (40 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   |  |
|                  | •   |  |
|                  | (soring Ensuit)   |  |
|                  | Signed this 26th day of JANUARY 2006  |  |
| Sign <b>a</b> te | Men-  |  |
| •                | By a difficient, president or other officer - If disentes we officers have not been selected, by an incorporater if in the hands of a receiver, sympton, or other court appealance fiduciary, by these fiduciary) |  |
|                  | JOHN E. CRACCHIOLO  |  |
|                  | (Typed or printed name of parame signing)   |  |
|                  | PRESIDENT   |  |
| ٠                | (Time of parton myolay)   |  |
|                  |   |  |

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