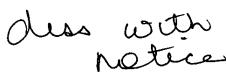
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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	。 s of Status。
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Special Instructions to Filing Officer:		
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POP 10

COVER LETTER

TO: Amendment Section Division of Corporations	Roy		
SUBJECT: Dissolution	7zenos		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	72EROS P00000005411		
DOCUMENT NUMBER:	981		
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
TETER WALLACE			
(Name of Contact Person)			
WALLACE FINE ART	INC		
(Firm/Company)			
(adaponus) 5350 GULF OF MEXIC	O DRIVE \$103		
(Address)			
LONGBOAT KEY FL 34 (City/State and Z	228		
(City/State and Zip Code) NEW MAILING Address			
For further information concerning this matter, plea	ise call: 1008 Heavenly Ln Fair Field IAU 5255 L		
	(941) 724-3255		
(Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
(Addi	75 Filing Fee & \$\sum \\$52.50 Filing Fee, fied Copy Certificate of Status & Certified Copy (Additional copy is enclosed)		
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		

FILED

ARTICLES OF DISSOLUM 26 AM 9:01

Pursuant to section 607.1401, Florida Statutes, this Florida profit corpora articles of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: WALLACE FINE ART The document number of the corporation (if known): TOOOO 005411 SECOND: The file date of the articles of incorporation: 01/10/2000THIRD: (CHECK AT LEAST ONE BOX) FOURTH: None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid. YES The net assets of the corporation remaining after winding up have been distributed SIXTH: BUT NO SHARES WERE 155UED to the shareholders, if shares were issued. YES SEVENTH: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. 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.) (Typed or printed name of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: WALLACE FINE ACT Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) PETER WALLACE 1008 HURNENLY LN FRIEFIELD, IA 52556 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. Signature of the Person Filing