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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

Division of Corporations		
SUBJECT: DISSOLUTION OF	CORPORATION	
DOCUMENT NUMBER:		
The enclosed Articles of Dissolution and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
SANDRIA L. PLOTT (Name of Perso TELAND WAY MARKA (Name of Firm)		
(Name of Perso	n)	
LELAND WAY MARK	CETING /NC	
(Name of Firm/	Company) /	
637 SEVERS LANDING	<u> </u>	
(Ad	dress)	
PACM HARBOR, FL (City/State/s	34683	
(City/State/a	and Zip Code)	
For further information concerning this matter, p	lease call:	
SANDRAL PLOTT (Name of Person)	at (737) 785-4633	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Ce	13.75 Filing Fee & S52.50 Filing Fee, certified Copy dditional copy is aclosed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	409 E. Gaines Street	

Tallahassee, Florida 32399

Tallahassee, Florida 32314

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 Department of State:		
	ISLAND WAY MARKETING INC, E. D		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized: 12/30/09		
	Effective date of dissolution if applicable: 4/3c/04 75 (no more than 90 days after dissolution file applicable)		
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		
	Signed this 30 th day of April , 2004.		
Signati	ure: Lindra & Olatt		
	(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)		
	(Typed or printed name of person signing)		
	PRESIDENT		
(Title 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: 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) 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.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00