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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
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SECRETARY OF STATE
AHASSEE, FLORID

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: DISSO/w di	on .		
DOCUMENT NUMBER: P 05000	116777		
The enclosed Articles of Dissolution and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Nicholas	L. Alossa Person)		
(Name of Contact	Person)		
Cotton Top Critters, Inc. (Firm/Company)			
(Firm/Compa	any)		
41 Fairchild	SJ.		
41 Fairchild (Address)			
Babson Park	FL 33827		
(City/State and Z	FL 33827 ip Code)		
For further information concerning this matter, plea			
(Name of Contact Person) at	(863) 5/4-028/ (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
	ied Copy Certificate of Status & Certified Copy		
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:				
	Cotton Jop Critters, Inc.				
SECOND:	The document number of the corporation (if known): Posoo 118	577 7			
THIRD:	The date dissolution was authorized: 12/14/07				
	Effective date of dissolution if applicable: 12/14/07 (no more than 90 days after dissolution)	on file date)			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for dissol	lution		
	Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled			
	The number of votes cast for dissolution was sufficient for approval by	SECRETARY ALLAHASSE			
	(voting group)	YOF STATE EE. FLORIDA	LED		
S	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)				
	(Title of person signing)				

Filing Fee: \$35