

P 9500000 5179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

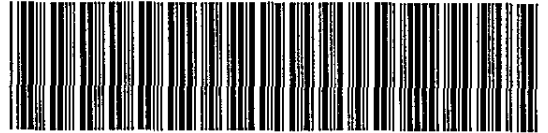
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VOLUNTARY WITH
[Signature]
10/27

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

SUBJECT: Voluntary Dissolution

DOCUMENT NUMBER: P95000005179

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher J. Stoker
7620 High Pines Court
Port Richey FL 34668

For further information concerning this matter, please call:

Christopher J. Stoker at (727) 845-1089

Enclosed is a check for the following amount:

\$43.75 Filing fee and certified copy (Additional copy is enclosed)

ARTICLES OF DISSOLUTION
OF STOWARD, INC.

Pursuant to Section 607.1401, 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:
STOWARD, INC.

SECOND: The document number of the corporation: P95000005179.

THIRD: The date dissolution was authorized: October 1, 2004.

Effective date of dissolution: October 1, 2004

FOURTH: Adoption of Dissolution:

Dissolution was unanimously approved by the shareholders in writing.

Signed this 13th day of October, 2004.

Signature:



CHRISTOPHER J. STOKER
President

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 Sec. 607.1407, Florida Statutes:

Name of Corporation: STOWARD, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

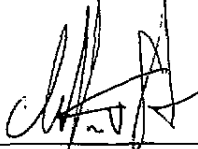
Description of information that must be included in a claim:

Name, address and telephone number of claimant as well as basis for claim.

Mailing address where claims can be sent:

Christopher J. Stoker
7620 High Pines Court
Port Richey FL 34668

A claim against the above corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.



Christopher J. Stoker