P99000064291

(Re	equestor's Name))
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phor	ue #)
PICK-UP	. WAIT	MAIL
(Bu	isiness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		





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Diss/ notice

Sp

Tallahassee, FL 32301

From:

TO: Amendment Section

COVER LETTER

Division of Corporations
SUBJECT: Genesis Presentations, Inc
DOCUMENT NUMBER: P9900064291
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
clo Genesis Studios, Inc. (Firm/Company)
465 Maitland Ave. (Address)
Altamente Springe FL 32701-SYY (City/State and Zip Code)
For further information concerning this matter, please call:
Trank Bartus at (407) 539-2606 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\instrum\$\$\$43.75 Filing Fee & \$\instrum\$\$\$\$\$ Certificate of Status & Certified Copy (Additional copy is enclosed) \$\instrum\$
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

ARTICLES OF DISSOLUTION

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

of dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Genesis Prosentations Inc. The document number of the corporation (if known): P99 0000 64291 SECOND: The date dissolution was authorized: AUGUST 7, 200 THIRD: Effective date of dissolution if applicable: AUSUST 7, 2007 (no more than 90 days after dissolution file date) Adoption of Dissolution (CHECK ONE) FOURTH: Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by 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 (voting group) 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

From:

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: Oenesis tresentations, he
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)
Genesic Prosentations In
465 Maitland Am.
Alternante Springs FL 32701-544
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is comment within 4 years after the filing of this notice.
Within 4 years after are hims of the house.
Frank Barts Printed Name of the Person Filing Signature of the Person Filing

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