P11000024028

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(Au		
(Cit	y/State/Zip/Phon	e #)
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(Bu	siness Entity Nai	me)
(Do	cument Number)	
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SECRETARY OF STATE
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COVER LETTER

Division of Corporations		
SUBJECT: Close corporation		
DOCUMENT NUMBER: \$\P\1\0000\26628		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jasmin Mejia		
(Name of Contact Person)		
(Name of Contact Person) Event Photo Cards Inc		
3711 Potomac		
(Address)		
Sachse TX 75048		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Name of Contact Person) at (813) 638-1967 (Area Code & Daytime Telephone Number)		
(Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\$43.75 Filing Fee & \$\$43.75 Filing Fee & \$\$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS: STREET ADDRESS:		

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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:	
SECOND:	The document number of the corporation (if known): P11000026628	
THIRD:	The date dissolution was authorized:	
	Effective date of dissolution <u>if applicable</u> : Of Of 202 (no more than 90 days after dissolution file date)	
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 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 addirector, president or other officer - of 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)	
	Jasmin Melia	
	(Typed or printed name) of person signing)	
	(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: Event Proto Cards Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Moved to another state / conporation disolved
InFlo2ida
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Jaconin Maia
409 (1) Print Frage # 201
Telesville=1X 15067
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.
Jasmin Mella Jaomen Mella
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