346469

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COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: DISSOLUTION OF CORPORATION DOCUMENT NUMBER: 346469 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DONNA TOMLINSON (Name of Contact Person) LINE-TRUE PHOTOS, INC (Firm/Company) 1801 18TH WAY (Address) WEST PALM BEACH, FL (City/State and Zip Code) For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) DONNA TOMLINSON (Name of Contact Person) Enclosed is a check for the following amount: Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) STREET ADDRESS: **MAILING 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 of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the kolidwing articles on:
FIRST:	The name of the corporation as currently filed with the Florida Department of State F
SECOND:	The document number of the corporation (if known): 346469
THIRD:	The date dissolution was authorized: 7/14/2008
	Effective date of dissolution if applicable: 7/14/2008 (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
	Line-True Photos, Inc (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)
	Shea Tomlinson (Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35