678594

<u>.</u>	(Requestor's Name)	
	(Address)	
	(Address)	·
	(City/State/Zip/Phone #)	
PICK-UF	P WAIT	MAIL ,
	(Business Entity Name)	•
	(Document Number)	!
Certified Copies	Certificates of Statu	s
Special Instructions	to Filing Officer:	

Office Use Only



400158359334

07/13/09--01037--023 **35.00

2009 JUL 30 PM 3: 4: SECRETARY OF STATE

Diss.

FB JUL 3 0 2009

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: Dissolution of corporation DOCUMENT NUMBER: 678594 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Georgia G. Devin (Name of Contact Person) Alan P. Devin Investigative Associates, INC. (Firm/Company) 3702 High Pine Drive (Address) Coral Springs, FL. 33065 (City/State and Zip Code) For further information concerning this matter, please call: Georgia G. Devin (Name of Contact Person) 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 Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: MAILING ADDRESS: Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2009

ALAN P. DEVIN INVESTIGATIVE ASSOCIATES, INC. GEORGIA G DEVIN 3702 HIGH PINE DR CORAL SPRINGS, FL 33065

SUBJECT: ALAN P. DEVIN INVESTIGATIVE ASSOCIATES, INC.

Ref. Number: 678594

We have received your document for ALAN P. DEVIN INVESTIGATIVE ASSOCIATES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

If the corporation is a **PROFIT** corporation it must be signed 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.

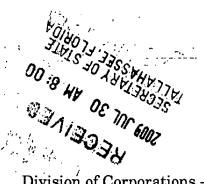
If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 109A00024651



ARTICLES OF DISSOLUTION

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 Florida Department of State:
	Alan P. Devin Investigative Associates, INC.
SECOND:	The document number of the corporation (if known): 678594
THIRD:	The file date of the articles of incorporation: July 16, 1980
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	The corporation has not commenced business. No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: (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.) Georgia G. Devin
	(Typed or printed name of person signing)
	Power of Afformy for Alan P. Devin Filing Fee: \$35 President
	Filing Fee: \$35 President