•				
(Requestor's Name)				
(Address)				
(Add	lress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to F	iling Officer:			

Office Use Only



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09/01/05--01008--015 **175.00

COVER LETTER

TO: Amendment Section					
Division of Corporations					
SUBJECT: SUNSHINE COMPANIES, INC.					
SUBJECT: OCHOTHINE COM ANIES, INC.					
DOCUMENT NUMBER: J93615					
The enclosed Articles of Dissolution and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
COOTT M COURSEDO FOO					
SCOTT M. GOLDBERG, ESQ.					
(Name of Person)					
NEXIA STRATEGY CORPORATION					
(Name of Firm/Company)					
• •					
20 NORTH ORANGE AVENUE, SUITE 1400					
(Address)					
ORLANDO, FLORIDA 32801					
(City/State/and Zip Code)					
(City/Satte/and Zip Code)					
For further information concerning this matter, please call:					
•					
SCOTT COLDDEDC 407 240 0000					
SCOTT GOLDBERG at (407) 318-8000					
(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$35 Filing Fee \$\ \times \\$43.75 Filing Fee & \times \\$43.75 Filing Fee & \times \\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status &					
(Additional copy is Certified Copy					
enclosed) (Additional copy is					
enclosed)					
MAILING ADDRESS: STREET ADDRESS:					
Amendment Section Amendment Section					
Division of Corporations Division of Corporations P.O. Box 6327					
P.O. Box 6327 409 F. Gaines Street					

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

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

FIRST:		poration as currently filed with th	ie Florida Department o	f State:
	SUNSHINE	COMPANIES, INC.		
SECOND:	The document numb	per of the corporation (if known):	J93615	
THIRD:	The date dissolution	was authorized: AUGUST 2	29, 2005	FLE SE
		solution <u>if applicable:</u> SEPTE		file date)
FOURTH:	Adoption of Dissolu	tion (CHECK ONE)		FLORE
	✓ Dissolution was was sufficient fo	approved by the shareholders. The approval.	ne number of votes cast	for dissolution
	Dissolution was	approved by of the shareholders	through voting groups.	
		nent must be separately provided n the plan to dissolve:	for each voting group e	ntitled
	The number of votes	cast for dissolution was sufficien	nt for approval by	
	i vere en en e	. =		
		(voting group)		
	Signed this 29th	day of AUGUST	2005	
	Signature:	ne the	0	
	(By a director, pro	esident or other officer - if directors or office if in the hands of a receiver, trustee, or other		
	FRANK AMO	DEO		
	(T)	yped or printed name of person signing)		• •
	PRESIDENT			
		(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: SUNSHINE COMPANIES, 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:

- (1) Name, address, phone number of claimant; (2) date of service;
- (3) Date and nature of the claimed incident, with sufficient details of events leading to claim; (4) Total dollar amount in controversy; (5) Include any supporting documents in the possession of the claimant.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

NEXIA STRATEGY CORPORATION

20 NORTH ORANGE AVENUE, SUITE1400

ORALNDO, FLORIDA 32801

ATTN: GENERAL COUNSEL

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.

FRANK AMODEO, PRESIDENT

Printed Name of the Person Filing

Signature of the Person Filing