

K94402

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

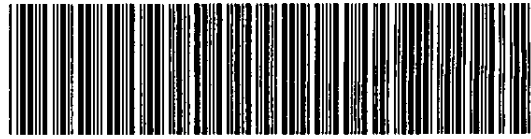
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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07/25/11--01008--014 **35.00

FILED
2011 JUL 25 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Diss. w/ Notice

TBrawn 7-27-11

STEVEN ANDREW JACKSON
Attorney and Counsellor at Law

The Biltmore Building
One North Pack Square, Suite 306
Asheville, NC 28801
(828) 252-7300
Fax: (828) 254-6599

July 22, 2011

Florida Department of State
Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: New Sun, Inc.
Articles of Dissolution

Dear Sir/Madam:

Enclosed please find an original and one copy of Cover Letter, Articles of Dissolution, and Notice of Corporate Dissolution with regard to the above captioned together with a check in the amount of \$35.00 for the filing fee. Please file and return a filed copy of the documents to me along with the Order of Dissolution or similar type document.

Thank you. I am,

Sincerely,


Steven Andrew Jackson
Attorney and Counsellor at Law

SAJ/pdw
Enclosures
cc: Ceil Salvadori

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: New Sun, Inc.

DOCUMENT NUMBER: K94402

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven Andrew Jackson

(Name of Contact Person)

Attorney and Counsellor at Law

(Firm/Company)

One North Pack Square, Suite 306

(Address)

Asheville, NC 28801

(City/State and Zip Code)

For further information concerning this matter, please call:

Steven Andrew Jackson

(Name of Contact Person)

at (828) 252-7300

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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
Tallahassee, FL 32301

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:
New Sun, Inc.

SECOND: The document number of the corporation (if known): K94402

THIRD: The file date of the articles of incorporation: 6/2/1989

FOURTH: (CHECK AT LEAST ONE BOX)

None of the corporation's shares have been issued.

The corporation has not commenced business.

FIFTH: 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.

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Signature: Cecilia A Salvadori
(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.)

Cecilia Salvadori
(Typed 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: New Sun, 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:

Cecilia Salvadori
215 Linda Vista Drive
Hendersonville, NC 28792

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

Cecilia Salvadori
215 Linda Vista Drive
Hendersonville, NC 28792

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.

Cecilia Salvadori
Printed Name of the Person Filing

Cecilia A. Salvadori
Signature of the Person Filing

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