## L45477

Requester's Name	
Address	01 NOV 14 AM 11: 19
City/State/Zip Phone #	SECRETARY OF STATE TALLAHASSEE, FLORIDA
	Office Use Only
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):  800-1045780989 -17/14/0101025-004 ******35.00 ******35.00
(Corporation Name)	(Document #)
Corporation Name)	(Document #)
3(Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	Photocopy
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	<ul> <li>□ Amendment</li> <li>□ Resignation of R.A., Officer/Director</li> <li>□ Change of Registered Agent</li> <li>□ Dissolution/Withdrawal</li> <li>□ Merger</li> </ul>
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other

**Examiner's Initials** 

CR2E031(7/97)

## ARTICLES OF DISSOLUTION

## FILED

01 NOV 14 AM 11: 19

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

rik31:	The hame of the corporation issear ood supply /	•
SECOND:	The date dissolution was authorized: 12/31/99	
THIRD:	Adoption of Dissolution (CHECK ONE)	
	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.	
Dis	solution was approved by vote of the shareholders through voting groups.	
e	the following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:	
The	number of votes cast for dissolution was sufficient for approval by	
	(voting group)	· . • · · ·
Si	gned this 1st day of November , 2001.	***************************************
Signature _	(By the Chairman or Vice Chairman of the Board, President, or other officer)	
	Harvey Oxenberg (Typed or printed name)	
	President (Title)	.a