L98340

(Re	questor's Name)	····
(Ad	dress)	
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(Cit	y/State/Zip/Phone	→ #)
PICK-UP	MAIT	MAIL
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(Document Number)		
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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March 6, 2008

Darlene Connell Regulatory Specialist 11 Florida Depart of State Division of Corporations PO Box 6327 Tallahassee, Fl. 32314

Re: Dissolution of Corporation:

Documents revised and complying with Section 607.1401 are enclosed. Hope everything is in order.

Thanks for your help,

Frederick Lawrence

President

104 Donlon Dr

New Smyrna Beach, Fl

Cell; 386 405-6579

Home: 386 423-8732



February 29, 2008

FREDERICK LAWRENCE KINETIC SALES, INC. 104 DONLON DRIVE NEW SMYRNA BEACH, FL 32168

SUBJECT: KINETIC SALES, INC.

Ref. Number: L98340

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6906.

Darlene Connell ERegulatory Specialist II

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

Letter Number: 108A00012832

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISSOLUTION OF KINETE SAVES. THE	
DOCUMENT NUMBER: L98340	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
FREDERICK LAWRENCE	
TRESERICIC LAURENCE (Name of Contact Person) KINETIC SALES- JUC	
104 DONION PRIME	
WEER SUYENT BELLEN, 109. 32168	
(City/State and Zip Code)	
For further information concerning this matter, please call:	0.4
(Name of Contact Person) (Name of Contact Person) (Area Code & Daytime Telephone Num 386 (423-8732-	Cel'
(Name of Contact Person) Area Code & Daytime relephone Num 3.86 (413-1731-1	-t-tours
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee & \$\sum_{\$\\$52.50}\$ Filing Fee & \$\sum_{\$\\$52.50}\$ Filing Certificate of Certified Copy (Additional copy is enclosed)	Status &
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 Ci	rcle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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	e:
	KINETIC SALKS, FINC.	
SECOND:	The document number of the corporation (if known): 4983 40	
THIRD:	The document number of the corporation (if known): 4983 40 The date dissolution was authorized: MARCH 1, 200 P	
	Effective date of dissolution if applicable: March 57 2005 (no more than 90 days after dissolution file date)	e)
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast for diswas sufficient for approval.	ssolution
	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:	1
	The number of votes cast for dissolution was sufficient for approval by	
	ASE C	O
	(voting group)	DB MAR
	TAR	20 °
	FFS :	#. C
,	(By a director, president or other officer - if directors or officers have not been selected, by	29
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	•
	To a large to the same of the	
	(Typed or printed name of person signing)	
	(Typed of printed name of person signing)	
	HESIDIENT	
	(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. 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: CLAIMS OUTSTRADING Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 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. Signature of the Person Filing

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