M36112

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SECRETARY GESTATE
ALLAHASSEE, FLORIDI

20 1201105

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION OF CORPORATION
DOCUMENT NUMBER: M 36112
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BEVERLY TJARKS (Name of Contact Person)
5995 CORRALES ROAD (Address)
CORRALES UM 87648 (City/State and Zip Code)
For further information concerning this matter, please call:
BEVERLY TJARKS at (505) 898-5012 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) (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

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Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits LLATION SEE. FLORIDA articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	SUN SHINE WAREHOUSES F.L.B., Inc
SECOND:	The document number of the corporation (if known): M 36 112
THIRD:	The file date of the articles of incorporation: 08/01/1986
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.
Sign	ature: X had M
_	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a preciver, trustee, or other court appointed fiduciary, by that fiduciary.)
٠	FRANK TJARKS (Typed or printed name of person signing)
	(Title of Person Signing)

' Filing Fee: \$35

Notice of Corporate Dissolution

FILED

This notice is submitted by the dissolved corporation named below for resolution of payment of Like 2n Alpha 38 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. FLORIDA 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: ME, ADDRESS, DATES, WHESCRIPTIM CIRCUMSTANCE OF CLAIM 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,

rinted Name of the Person Filing