N)97000002805

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
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Certified Copies	Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Intent To Dissolve
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Intisar Bess
None (Name of Firm/Company)
(Name of Firm/Company)
3645 Will Lee Rd
3645 Will Lee Rd (Address) College Park, GA 30349 (City/State/and Zip Code)
(City/State/and Zip Code)
For further information concerning this matter, please call: INGSA BESS at (404) 763-2247 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Sas Filing Fee Sas Sas Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) Sas Filing Fee & Sas
MAILING ADDRESS.

MAILING ADDRESS:
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

STREET ADDRESS:

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 ARTICLES OF DISSOLUTION 14 CAN SECUE STATE OF ST

FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	Novel Professional Services, Inc.	
SECOND:	The document number of the corporation (if known): N9700002805	
THIRD:	The file date of the articles of incorporation: 5/497	
FOURTH	The corporation has not commenced to conduct its affairs.	
FIFTH:	No debts of the corporation remains unpaid.	
SIXTH:	Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)	
	The dissolution was authorized by a majority of the directors: OR	
	The dissolution was authorized by an incorporator.	
	☐ The dissolution was authorized by a majority of the incorporators.	
	Signed this 01 day of July 2005.	
Signature: (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	Tritisar Bess (Typed or printed name of person signing)	
	(Typed of printed name of person signing)	
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Filing Fee: \$35

(Title of person signing)