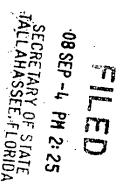
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(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: ALCHEMY PRO (DISSOLUTION)			
DOCUMENT NUMBER: P000000 11 647			
The enclosed Articles of Dissolution and fe	ee are submitted for filing.		
Please return all correspondence concerning this matter to the following:			
FLAVIA M. FUS	ARO		
(Name of C	Contact Person)		
ALCHEMY PRODUCTIONS INC (Firm/Company)			
3229 HUNTINGT	• • •		
(Address)			
WESTON FL	33332		
(City/State and Zip Code)			
For further information concerning this matter, please call:			
FLAVIA M. FUSARO at (954) 337-1477			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount	nt:		
\$35 Filing Fee \$3.75 Filing Fee & ertificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 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 607.1403, 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: ALCHEMY PRODUCTIONS INC.			
SECOND:	The document number of the corporation (if known): 1000000 11647			
THIRD:	The date dissolution was authorized: 08 29 2005			
	Effective date of dissolution if applicable: (Same as above) (no more than 90 days after dissolution file date)			
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.			
	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:			
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group) ASSEE, FLORIDE Signature: Signature:			
	(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)			
	FLAVIA M. FUSARO			
(Typed or printed name of person signing)				
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35