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| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE

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LYONS AND ASSOCIATES ORLANDO/DAYTONA BEACH-TAMPA/ST. PETERSBURG

4624 EDGEWATER DRIVE ORLANDO, FLORIDA 32804

Phone 407 298-7040 Fax 407 298-5630

Florida Dept. of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sirs,

This letter is to notify you of my intent to dissolve my corporation, Your Photos, Inc.

Thank you,

Jeffrey K. Lyons

President

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 is: YOUK PHS to S INC. | · |
|-------------|---|---|
| SECOND: | The date dissolution was authorized: TAWURAT 6, 2003 | |
| THIRD: | Adoption of Dissolution (CHECK ONE) | |
| | solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval. | |
| ☐ Disa | solution was approved by vote of the shareholders through voting groups. | |
| | The following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve: | |
| | number of votes cast for dissolution was sufficient for approval by | |
| | TEXT CYOWS SOLE OWNER TO SEE 3 (voting group) APPL AND | T |
| Signature _ | (By the Chairman or Vice Chairman of the Board, President, or other officer) | |
| | (Typed or printed name) | |