

P00000075582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

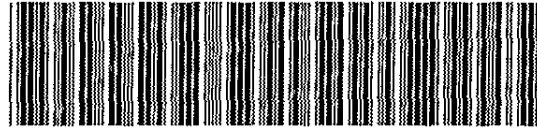
(Business Entity Name)

(Document Number)

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03 MAR 13 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2/20/03

ATTACHED IS FORM FOR THE
DISSOLUTION OF GULF COAST DEVELOPMENT,
INC. MY PHONE # (239) - 261-0788
AND THE RETURN ADDRESS IS:

JOETTA D. ARBAZIO
1679- GALLEON DRIVE
NAPLES FLORIDA 34102

ENCLOSED IS A CHECK FOR \$43.75
FOR ONE CERTIFIED COPY OF THE DISSOLUTION

THANK YOU
Joetta D. Arbazio

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: GULF COAST DEVELOPMENT, INC.

SECOND: The date dissolution was authorized: 12/31/02

THIRD: 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 vote of 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)

Signed this _____ day of _____

Signature Joetta D. Abba210
(By the Chairman or Vice Chairman of the Board, President, or other officer)

JOETTA D. ABBA210
(Typed or printed name)

PRESIDENT
(Title)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA