P00000113535

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(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of Champions Edge, Inc.	
DOCUMENT NUMBER: 1000001/3535	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
James Millws (Name of Person)	
Champions Edge, Inc (Name of Firm/Company)	
7603 Dunbridge Drive	
· · · · · ·	
Odess 4, Florida 33556 (City/State/and Zip Code)	
For further information concerning this matter, please call:	
<u>Tames Millus</u> at (8/3) 926-5955 (Name of Person) (Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$\times \times \	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tellebasses Florida 22214 Tellebasses Florida 22214 Tellebasses Florida 22214	
Fallahassee, Florida 32314 Tallahassee, Florida 32399	

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:
	Champions Edge, Inc.
SECOND:	P00000 113536
THIRD:	The file date of the articles of incorporation: 12-7-2000 FG F
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.
SEVENTE	H: Adoption of Dissolution (CHECK ONE)
	☐ A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
	Signed this 10th day of MARCh. 2005.
	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.)
	(Typed or printed name of person signing)
	(Title of person signing)

Filing Fee: \$35