P0000117809

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
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ECRETARY OF STATE

APRIO 2/4/10

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Dissolution of Corporation		
DOCUMENT NUMBER: P00000117809	<u></u>	
The enclosed Articles of Dissolution and fee are submitted	d for filing.	
Please return all correspondence concerning this matter to	the following:	
LOUISE FERRIS		
(Name of Contact Person))	
FERRIS FINANCIAL TAX GROUP		
(Firm/Company)		
925 TOPPINO DRIVE		
(Address)		
KEY WEST FL 33040		
(City/State and Zip Code	e)	
For further information concerning this matter, please call:	:	
Louise Ferris at (305 (Are	294-3525 ea Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$\sqrt{35}\$ Filing Fee \$\sqrt{\$43.75}\$ Filing Fee & \$\sqrt{\$43.75}\$ Filing Fee & Certificate of Status \$\sqrt{\$Additional cenclosed}\$	py Certificate of Status &	
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 Plans the following articles of dissolution:

of dissolutio	in: TALLAHASSEE, FLORID,
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	CAROL A BRENN PA
SECOND:	The document number of the corporation (if known): P00000117809
THIRD:	The date dissolution was authorized: 12/31/2009
	Effective date of dissolution <u>if applicable:</u> 12/31/2009 (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)
	Signature: Order O-Your President (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)
	CAROL A BRENN PA
	(Typed or printed name of person signing) PRESIDENT
	(Title of person signing)

Filing Fee: \$35