P01000003462

(Requestor's Name)					
(Address)					
(Address)					
(.ddi 033)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Emily Hame)					
(Document Number)					
Certified Copies Certificates of Status					
Considerations to Filing Officer					
Special Instructions to Filing Officer:					
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04/24/09--01017--026 **43.75

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2009 APR 24 PH 12: 01

SECRETARY OF STATE
TALLAHASSEE, FLORID.

Diss. W/Notice TB 4-29-09

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: DISSOLUTION OF FLORIDA CORPORATION				
DOCUMENT NUMBER: P0/00003462				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Name of Contact Person)				
Jendra Enfergerser, Int. (Firm/Company)				
8951 BONITA BEACH ROAD				
74.505 = 200 (Address)				
BONIA SPRINGS FC 34135 (City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (239) 850 - 2960 (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$\square\$ \$\squa				
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section				
Amenament Section Amenament Section Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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:				
	Jender Enforpeiges, Im.				
SECOND:	The document number of the corporation (if known): PO/00003462				
THIRD:	The date dissolution was authorized: $4/22/09$				
	Effective date of dissolution <u>if applicable:</u> (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 ALL APR SECRETAR ALL APR 24 24 26 27 26 27 28 29 20 20 20 20 20 20 20 20 20				
	<u></u>				
	(voting group) OF STATE CRIDE				
	// President President				
	Signature: Dendiza EN1000 RUSSILL				
	(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)				
	Proc' Lan L				
	(Title of person signing)				

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:	ASIGNE	ENforpeiles =	The.
Date of dissolution will be th specified in the Articles of D		ed with the Department of State or as	
Description of information th	at must be included in a cla	uim:	
Mailing address where claim	s can be sent: (Claims canno	ot be sent to the Division of Corporations)	
	89511	BONIA ROSEL Rd	
	unit	525-309	
	Bouct	27, 2241992 A 28178	
A claim against the above na within 4 years after the filing		rred unless a proceeding to enforce the clair	n is commenced
Printed Nam	Sound Ring e of the Person Filing	Signature of the Person Fili	ing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00