P01000015677

(Re	equestor's Name)	,
(Ad	ldress)	
(Ad	ldress)	
·		
(Cit	ty/State/Zip/Phone	#)
(011	ty/Otate/Zip/i none	**;
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
,	,	
Contition Coming	Cartificates	of Ctotus
Certified Copies	Certificates	or status
Special Instructions to	Filing Officer:	
i		
	•	
	 	

Office Use Only



200138161432

11/24/08--01052--012 **43.75

DB NOV 24 AM 9: 49
SECRETARY OF STATE
ANALYSEE FLORIDA

Joseph John Mark

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution
DOCUMENT NUMBER: UNKNOW
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Anthony
(Name of Contact Person)
5425 West, Inc.
(Firm/Company)
S425 West Atlantic BERNET (Address) (Address) (City/State and Zip Code)
(Address)
MARATE F) 330639
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\$43.75 Filing Fee & \$\$43.75 Filing Fee & \$\$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) \$\$43.75 Filing Fee & \$\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

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:
	5425 West Inc
SECOND:	The document number of the corporation (if known): UNKNOWN
THIRD:	The date dissolution was authorized: 8 31 08
	Effective date of dissolution if applicable: 83108 (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 east foodissolution 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: (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) A A A A A A A A A A A A A
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35