PO100017918

	(Requestor's Name)	
:	•	
	(A d d = a = a)	
	(Address)	t
	•	_
• •		
•	(Address)	
	` '	
	1	
		· · · · · · · · · · · · · · · · · · ·
	(City/State/Zip/Phone #)	
	_	
PICK-UF	P WAIT	MAIL MAIL
	<u> </u>	
* .		
	(Business Entity Name)	_
,	(Document Number)	
	(Document Number)	
Certified Copies 🗸	Certificates of	Status
	•	· · · · · · · · · · · · · · · · · · ·
Special Instructions	s to Filing Officer:	
The solar Work and Well		
	•	
		ļ
	•	
		ł
		ļ
·		Į.
		ĺ

Office Use Only



200182051362

06/17/10--01032--014 **43.75

D/ Danctor

10 JUN 17 PM 3: 38

MERCHAND FILLS 119 2010

COVER LETTER

Division of Corporations		
SUBJECT: Jungle Works, Inc.		
DOCUMENT NUMBER: POIO ODO 17918		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Henry J. Elliman (Name of Contact Person)		
(Firm/Company)		
1866 Hardin Ln. NE (Address)		
Palm Bay Florida 32905		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Henry Elliman at (321) 674-2226 (Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & \$\sum \\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) \$\sum \\$35 Filing Fee & \$\sum \\$52.50 Filing Fee, Certificate of Status & 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:
	Jungle Works, Inc.
SECOND:	The document number of the corporation (if known): Polocol7918
THIRD:	The date dissolution was authorized: 3/30/20/0
	Effective date of dissolution if applicable: 3/30/20/0 (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)
	An The state of th
	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)
	Henry John Elliman (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Vice President (Title of person signing)
	(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: Jungle Works Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
1) Date of Purchase
2) Amount due
3) Purchased by (Name)
4) Method of shipment
5) Proof of Purchase
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Henry Elliman
1866 Hardin ha NE
Palm Bay Florida 32905
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

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

Printed Name of the Person Filing