## P01000072400

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: Paradigma Inc. Dissolution	
DOCUMENT NUMBER: P01000072400	
DOCUMENT NUMBER: 1 3 1 3 3 3 3 3 1 2 1 3 3	
The enclosed Articles of Dissolution and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
William H. Williford	
(Name of Contact	Person)
Paradigma Inc.	
(Firm/Compa	any)
11162 NW 68 Place	e e galeke gal
(Address)	A Section 18 Control 1
Parkland, FL. 33076	
(City/State and Z	ip Code)
For further information concerning this matter, plea	se call:
	( 703 <sub>)</sub> 344 1309
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Addir	75 Filing Fee & \$\sum \\$52.50 Filing Fee, fied Copy Certificate of Status & fional copy is Certified Copy (Additional copy is enclosed)
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

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	Γ: The name of the corporation as currently filed with the Florida Department of State:	
rikst.		
	Paradigma Inc	
SECOND:	The document number of the corporation (if known): P01000072400	
THIRD:	The file date of the articles of incorporation: $\frac{07/23/2001}{}$	
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.	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	ature: William H. Willford	
	(By a director, president or other office) - 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.)	
	WILLIAM H. WILLIFOLD  (Typed or printed name of person signing)	
	PRESTOEM	
	(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:\_Paradigma Inc Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Expense receipt to include date of expense, services provided, name of business, and amount of expense Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) William Williford 11162 NW 68 Place Parkland, FL 33076 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. William H. Wilhford Signature of the Person Fifing William H. Williford Printed Name of the Person Filing

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