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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE

AND 155 MIND 155

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: DISOLUTION OF CORPORATION	
DOCUMENT NUMBER: POI 0060 8783	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
TARORAHI FUGATE	
(Name of Contact Person)	
SHATTES, ETC, INC.	
(Firm/Company)	
11.111 6 mars to in Not	
(Address) Sunnctacto, K. 34491 (City/State and Zip Code)	
(Address)	
Sunnorthand, 12 3441	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
<i>A</i>	
Amount (2007 - 11 252) 200 (200)	
(Name of Contact Person) at (352) 357 43 20 (Area Code & Daytime Telephone Number	/
(Name of Contact Leison) (Area Code & Daytime Telephone Numbe	1)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \Bigcup \$43.75 Filing Fee & \Bigcup \$52.50 Filing Fee,	
Certificate of Status Certified Copy Certificate of Status &	
(Additional copy is Certified Copy	
enclosed) (Additional copy is enclosed)	
MAILING ADDRESS:	
Amendment Section Amendment Section	
Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, 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:		
	SHATTES ETC WC.		
SECOND:	The document number of the corporation (if known): Polobo 8783/		
THIRD:	The date dissolution was authorized: 12/31/14		
	Effective date of dissolution if applicable: /2/3/// (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)		
	(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) Targaman L. Moart		
	(Typed or printed name of person signing)		
	PRESIDENT.		
	(Title of person signing)		

Filing Fee: \$35