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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(District)		
(Document Number)		
(Edition Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		



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02/02/05--01042--009 **43.75

SFEB-2 AM 9: 12

Dissolution W/Motice

Office Use Only

T BROWN FEB - 4 2005

TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations			
SUBJECT: COPPORATO	Dissolution		
DOCUMENT NUMBER: P01			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concernir	ng this matter to the following:		
RUDOLA H (Name of	H. Brown III Person)		
(Name of	Firm/Company)		
303 DOR1S	Orive (Address)		
	(Address)		
LAKELAND,	FL 33813 State/and Zin Code)		
(City/	State/and Zip Code)		
For further information concerning this ma	atter, please call:		
RUDDLPH A. Brown, III (Name of Person)	T at (863) 646-7672 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amo	unt:		
□ \$35 Filing Fee	\$43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$ Certificate of Status & Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399		

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	ST: The name of the corporation as currently filed with the Department of State:		
	It's ABOUT Time, Inc.		
SECOND:	The document number of the corporation (if known): Poloooo 9 8598 The date dissolution was authorized: 1-1-05		
THIRD:	The date dissolution was authorized: 1-1-05		
	Effective date of dissolution if applicable: 1-1-05 (no more than 90 days after dissolution file date)		
FOURTH:			
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.		
	☐ Dissolution was approved by of 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 4 Officers Voted for DISSOLUTION (voting group) Signed this day of JANUARY , 2005		
Signed this day of January, 3005			
Signa			
	(Typed or printed name of person signing)		
	Presibent		
	(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: It is Queen Date of dissolution will be the date the dissolution is filed	
specified in the Articles of Dissolution.	The die 2 spatial of 2 days of do
Description of information that must be included in a claim	m:
Mailing address where claims can be sent: (Claims cannot	t be sent to the Division of Corporations)
LAKELAND, FL 3	Orive
LAKELAND, FL 3	338/3
	
A claim against the above named corporation will be barre is commenced within 4 years after the filing of this notice	
Property 11 Barrer 177	
Printed Name of the Person Filing	Signature of the Person Filing

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