P020000979

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700054486377

05/16/05--01011--005 **35.00

OS MAY 16 PH 1: 02
SECRETARY OF STATE



T. Smith MAY 2 3 2005

COVER LETTER

حزانا

TO: Amendment Section

Tallahassee, Florida 32314

Division of Corporations
SUBJECT: Superior Professional Management Services, Inc.
DOCUMENT NUMBER: <u>P0200000879</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person) (Name of Firm/Company)
(Name of Person)
Su Pariar Insperson I Havagement Sarries Ita
(Name of Firm/Company)
4924 R.W. 1344 Street Suite A-G
(Address)
GAINSVINE FL 32609
(City/State/and Zip Code)
For further information concerning this matter, please call:
Solis B. Rays) at (352) 374-9995 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\ \tag{\$43.75 Filing Fee & }\ \tag{\$43.75 Filing Fee & }\ \tag{\$52.50 Filing Fee,} \\ Certificate of Status & Certified Copy & Certificate of Status & Certified Copy & Cert
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 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:	The name of the corporation as currently filed with the Florida Department of State:		
	Superiar Professional Management Services, Inc.		
SECOND:	The document number of the corporation (if known): Polowow879		
THIRD:	The date dissolution was authorized: 4 - 30 - 5		
	Effective date of dissolution if applicable: (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 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		
	(voting group)		
	Signed this		
	FLORR II		
	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)		
	Jolis B. Rojo		
	(Typed or printed name of person significal)		
	President.		
	(Title of person signing)		

Filing Fee: \$35