## PD2000000999

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

Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section

ł,

Division of Corporations				
SUBJECT: Voluntary Dissolution				
DOCUMENT NUMBER: P0200000	0959			
The enclosed Articles of Dissolution and	fee are submitted fo	or filing.		
Please return all correspondence concerning this matter to the following:				
Gabor Babos				
(Name of Contact Person)				
Mind US Inc. (DBA: Magic Touch Remodeling)				
(Firm/Company)				
4375 SW 10th Place Apt 303				
(A	ddress)			
Deerfield Beach, FL 33442				
(City/State and Zip Code)				
For further information concerning this ma	tter, please call:			
Gabor Babos	at ( 954	531-1334		
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)		
Enclosed is a check for the following amou	nt:			
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing F Certified Copy (Additional copy enclosed)	Certificate of Status &		
MAILING ADDRESS: Amendment Section		STREET ADDRESS: 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 607.1401, 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:		
	Mind US Inc.		
SECOND:	The document number of the corporation (if known): P0200000959		
THIRD:	The file date of the articles of incorporation: 01/03/2002	<u>ب</u>	
FOURTH:	(CHECK AT LEAST ONE BOX)	200	
	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:		
	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	if	
	Gabor Babos (Typed or printed name of person signing)		
	VP		
	(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: MIND US Inc	
Date of dissolution will be the date the dissolution is filed with the specified in the Articles of Dissolution.	Department of State or as
Description of information that must be included in a claim:	
claimed amout, date of service, description of s	ervice
Mailing address where claims can be sent: (Claims cannot be sent	to the Division of Corporations)
4375 SW 10th Place Apt 303	•
Deerfield Beach, FL, 33442	
A claim against the above named corporation will be barred unless within 4 years after the filing of this notice.	a proceeding to enforce the claim is commenced
Gabor Babos	
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