P0200001721

(Requestor's Name)
(Address)
(
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations	•
SUBJECT: Nucle Artworks	s, Inc.
DOCUMENT NUMBER:	00 1721
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this i	natter to the following:
Jennifer A. Ja (Name of Conta	ylor
Taylored Dee	ale Arts
160 Moorings Park (Address	
1./	34105-2123 Zip Code)
(City/State and	Zip Code)
For further information concerning this matter, p	lease call:
(Name of Contagt Person)	at (<u>239</u>) <u>643.6742</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Ce (Ac	3.75 Filing Fee & S52.50 Filing Fee, rtified Copy Certificate of Status & Certified Copy rclosed) (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

Tallahassee, FL 32314

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 States	
SECOND:	The document number of the corporation (if known): P020000172	
THIRD:	The date dissolution was authorized: UKK 30, 2007	
	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 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)	
	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)	
	(Typed or printed name of person signing)	
	President - Quoner (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: 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: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Jennifer Ashley Taylor 160 Moorings Park Drive J201 Naples FL 34105 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.

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