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(Requestor's Name)
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SECRETARY OF STAIL

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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution of Corpore	tion	
DOCUMENT NUMBER: P02000107	25	
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jose Sotolongo (Name of Contact Person)		
(Name of Contact Person)		
Section 444 Product	ions, Inc.	
(Firm/Company)		
8 5 60 5 w 16 ST (Address)		
(Address)		
Miani R 33155		
M, Ami R 33155 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Name of Contact Person) at (305) (Area Contact Person)	606 56 73	
(Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
35 Filing Fee \$43.75 Filing Fee & S43.75 Filing Fee Certificate of Status Certified Copy (Additional copy i enclosed)	Certificate of Status &	
	TREET ADDRESS:	
	Amendment Section 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:

Filing Fee: \$35