

PO2000048932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

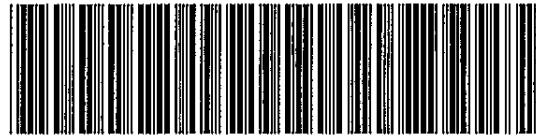
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG -9 AM 9:48

FILED

Disa CW 8-9-04

LAW OFFICES OF KEVIN S. GARRIS, P.A.
Attorney and Counselor at Law

3000 Gulf to Bay Blvd.
Second Floor
Clearwater, Florida 33759
Phone: (727) 797-2827
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Of Counsel
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8875 Hidden River Parkway
Suite 300
Tampa, Florida 33637
Phone: 1-(888) 334-3436
Fax: (727) 797-2016

Of Counsel
Raymond S. Dietrich

August 5, 2004

Amendment Section (**Carol Mustain**)
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32399

Re: Pocket Change International, Inc.

Dear Ms. Mustain:

As requested, please find enclosed check no. 1259 in the amount of Thirty-Five and 00/100 Dollars representing the fees associated with the dissolution of the above corporation. (The Articles of Dissolution were mistakenly forwarded on yesterday without the check enclosed)

Thank you for your unusual attentiveness in this matter. It is greatly appreciated!

Sincerely,



Kevin S. Garriss, Esq.

Enclosure

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF POCKET CHANGE INTERNATIONAL, INC.

DOCUMENT NUMBER: PO2000048932

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEVIN S. GARRIS, ESQUIRE

(Name of Person)

LAW OFFICES OF KEVIN S. GARRIS, P.A.

(Name of Firm/Company)

3000 GULF TO BAY BLVD. Suite 311

(Address)

CLEARWATER, FLORIDA 33759

(City/State/and Zip Code)

For further information concerning this matter, please call:

KEVIN S. GARRIS, ESQUIRE

(Name of Person)

at (727) 797-2827

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, 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: The name of the corporation as currently filed with the Department of State:

POCKET CHANGE INTERNATIONAL, INC

SECOND: The document number of the corporation (if known): P02000048932

THIRD: The date dissolution was authorized: August 3, 2004

Effective date of dissolution if applicable: IMMEDIATELY

(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 _____ day of _____.

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)

KEVIN S. GARRIS

(Typed or printed name of person signing)

VICE President

(Title of person signing)

Filing Fee: \$35

FILED
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DEPT. OF STATE
TALLAHASSEE, FLORIDA