0200005149

(Re	questor's Name)	and the same of th			
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Do	cument Number)				
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Special Instructions to Filing Officer:					
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10/06/08--01020--007 **43.75

T. Roberts OCT 1 4 2008

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: CORPORATE DISOLUTION OF SARASOTA CROSSINGS SPIRIT	ミエルく・
DOCUMENT NUMBER: <u>P02000051495</u>	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ROMAS. D. BUIVYDAS (Name of Contact Person)	
SARASOTA CROSSINGS SPIRITS INC. (Firm/Company)	
6 JERICHO HILL RD (Address)	
SOUTHBOROUGH, MA 01772 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Ruta Joun; Aci at (941) 366-548 (Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
S35 Filing Fee \$\times \$\frac{1}{2}\$43.75 Filing Fee \$\times \$\tim	
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles in:
of dissolutio	Ω Du .
FIRST:	The name of the corporation as currently filed with the Florida Department of State F_{E} , F_{E} OR_{IDA}
	SARASOTA CROSSINGS SPIRITS, INC.
SECOND:	The document number of the corporation (if known): Po 200051495
THIRD:	The date dissolution was authorized: TUNE 23, 2008
	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)
\$	(By a director, president or other officer - it 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)
	RUTA JOUNINE
	(Typed or printed name of person signing)
	OFFICER -V.P OF CORPORATION (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 " <i>Notice of C</i>	orpora	te Dissolution" i	s optional an	nd is not require	ed when filir	ıg a volun	tary dissoluti	ion.
Name of Corpora	tion:	SARASO	ra Cr	ossings	SPIR	TS IN	1C·	
Date of dissolution specified in the A			ssolution is f	filed with the D	epartment o	f State or	as	
Description of inf	ormati	on that must be i	ncluded in a	claim:				
DATE	OF T	DISOLUTIO	N 00	cue a Ea	00	A-061	<u>1 720</u>	3008·
COMPA	2	WAS SOL	-D TOO	2 3350	.000	2700 ·	MOINE	>
Tracts (سحد	e ovae	S 800 0	∞ .				
		<u> </u>			····			
Mailing address v	vhere c	laims can be sen	t: (Claims ca	nnot be sent to	the Division	of Corpo	orations)	
_	(· JERIC	to the	L RO.		· · · · · · · · · · · · · · · · · · ·	<u></u>	
_	ے	SOUTHBU	roney	MA	SEFIC			
				<u> </u>				
A claim against the within 4 years after				barred unless a	proceeding	to enforce	the claim is	commenced
R	J74	JOUNIA				Sin	12	
	Printed	Name of the Person	Filing		Sign	ature of the	Person Filing	,

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