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## **COVER LETTER**

TO: Amendment Section

Amendment Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
SUBJECT: Carney Communications + Events, Inc.
DOCUMENT NUMBER:P0200054582
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
(Firm/Company)
214 Commonwealth Ave. #2 (Address)
(Address)
Baston MA 02116
(City/State and Zip Code)
For further information concerning this matter, please call:
Karen Curney at (617) 266-7515  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
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MAILING ADDRESS: STREET ADDRESS:

Amendment Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

## 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:	
	Carney Communications + Events, Inc.	
SECOND:	The document number of the corporation (if known): POJODO 54582	ر
THIRD:	The file date of the articles of incorporation: May 16, 2002	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	90 DE
FIFTH:	No debt of the corporation remains unpaid.	-3
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	AH 8: 51
SEVENTH:	Adoption of Dissolution (CHECK ONE)	25
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
*	Please dissolve as of Dec. 31, 2006	
Sign	Please dissolve as a Dec. 31, 2006  nature:  Harry  (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
	(Typed or printed name of person signing)	
	President (Title of Person Signing)	

Filing Fee: \$35