P02 6660 58968

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Tuto	Italiano, Inc
DOCUMENT NUMBER: POZOC	0058968
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
· Moira M	CGRATH BROUS
Tutto Ita	eliano, Inc
·	• • •
19 E. Newport Center 1 (Address	Prive, Suite PH-E
Deer held Beach, 7 (City/State and	2 33442
(City/State and	1 Zip Code)
For further information concerning this matter, p	lease call:
MOIRA MCRATH BOZOUS (Name of Contact Person)	at (GS4) 428 - 3888 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
· ·	3.75 Filing Fee & S52.50 Filing Fee, rtified Copy
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations 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:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Tutto Italiano, Inc.
	The document number of the corporation (if known): P0200058968.
THIRD:	The file date the articles of incorporation: $\frac{5 28 02}{}$
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
	The net assets of the corporation remaining after winding up have been distributed o the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution.
	A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution.
Signat	(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.)
	Moils MGRATH BROWS (Typed or printed name of person signing)
	President
	(Title of Person Signing)

Filing Fee: \$35