P02000061350

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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SECRETARY OF STATE
PALLAHASSEF FINANCE

OF STATE



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 17, 2005

JAVIER C. AMATO KELLYMAR, INC. 2527 SW 177 AVENUE MIRAMAR, FL 33029

SUBJECT: KELLYMAR, INC. Ref. Number: P02000061350

We have received your document for KELLYMAR, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can not file articles of revocation of dissolution until after a corporation has been dissolved. This corporation is still in an ACTIVE status.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 105A00011484

Irene Albritton Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

| TO: Amendment Section Division of Corporations | |
|-----------------------------------------------------|----------------------------------------------------------------|
| KELLYMAN SUBJECT: KELLERMAR, INC | |
| SUBJECT: NELLETIMON, INC. | |
| DOCUMENT NUMBER: P02000061350 | • |
| The enclosed Articles of Dissolution and fee are | submitted for filing. |
| Please return all correspondence concerning this n | natter to the following: MATO Person) |
| JAVIER C AMATO | |
| (Name of Person) | |
| | |
| (Name of Firm/Company) | |
| (Name of Firm/C | ompany) |
| 2527 S W 177 | AVENUE |
| (Address |) |
| MIRAMAR EI | 22020 |
| MIRAMAR, FL 33029 (City/State/and Zip Code) | |
| (Chiji Suho dhe 1 | Lip Code) |
| For further information concerning this matter, ple | ease call: |
| | |
| JAVIER C AMATO | (754) 423-1213 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| , | , , , , , , , , , , , , , , , , , , , , |
| Enclosed is a check for the following amount: | |
| Certificate of Status Cert (Add | .75 Filing Fee & \$\square\$ \$\$52.50 Filing Fee, iffied Copy |
| MAILING ADDRESS: | STREET ADDRESS: |
| Amendment Section | Amendment Section |
| Division of Corporations | Division of Corporations |
| P.O. Box 6327 Tallahassee, Florida 32314 | 409 E. Gaines Street Tallahassee, Florida 32399 |
| Tallahassee, Florida 32314 | 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 Florida Department of State: KELLY HERMAR, INC |
|---------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SECOND: | The document number of the corporation (if known): P02000061350 |
| THIRD: | The date dissolution was authorized: DECEMBER 31, 2004 |
| | Effective date of dissolution if applicable: JANUARY 1, 2005 (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 MARIN day of 3/20/03. | |
| | 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) |
| | JAVIER C AMATO |
| | (Typed or printed name of person signing) |
| | PRESIDENT TV: W |
| | (Title of person signing) |

Filing Fee: \$35