PDZ000003381

(F	lequestor's Name)	
(A	ddress)	
A)	ddress)	
	city/State/Zip/Phon	ne #)
PICK-UP		MAIL
(É	Business Entity Na	me)
(C	Pocument Number)
Certified Copies	Certificate	s of Status
Special Instructions t	o Filing Officer:	
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TALLARASSEE, FLORES

AHDISS MADISION

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION OF FIREFLY INC.
DOCUMENT NUMBER: POZ0006338/
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Frizabeth Voyles
Ecizabeth Voyles (Name of Contact Person)
Firefly Inc
FIREFLY INC (Firm/Company)
443 Port Royal Blvd (Address)
SAtellite Bch, Fl. 32937 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Euzabeth A. Voyles at (321) 431:266/ (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\times \$43.75 Filing Fee & \$\times \$\$43.75 Filing Fee & \$\times \$\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section Division of Corporations Division of Corporations
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 607.1403, 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:		
	FIRE fly Inc			
SECOND:	The document number of the corporation (if known): POZOCO63	381		
ΓHIRD:	The date dissolution was authorized: $12/31/09$			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution fi	le date)		
OURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval.	or dissolution		
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group ent to vote separately on the plan to dissolve:	titled		
	The number of votes cast for dissolution was sufficient for approval by			
	Elizabeth Voyles (voting group)	→ ;		
		AUG AUG		
		6-2		
	Signature:	EF. FLOME		
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	5 3 A		
	Euzabeth Voyles (Typed or printed name of person signing)			
	President			
•	(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 "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: FIRE Fly INC.		
Date of dissolution will be the date the dissolution is filed with the Despecified in the Articles of Dissolution.	partment of State or as	
Description of information that must be included in a claim:	# 1	
Itemized list of articles in clair	n'	
date of purchase/service	•	
person ordering item/service		
date of delivery of service/ite	emis	4
I temized cost of item/service	· ·	
COPY of INVOICE Mailing address where claims can be sent: (Claims cannot be sent to the	he Division of Corporations)	. · · · · · · · · · · · · · · · · · · ·
443 PORT ROYAL BIVE.		
Satellite Beach, Fl. 32	<u> 2937 </u>	

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Euzabeth A. Voyles

Printed Name of the Person/Filing

Signature of the Person Filing

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