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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

TO: Amendment Section

Tallahassee, Florida 32314

Division of Corporations
SUBJECT: DESNITION OF STATE CARRIERS, INC.
DOCUMENT NUMBER: pozooo 65043
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Voslaysis CEPEZO (Name of Person)
State CARRIERS TOC. (Name of Firm/Company)
3811 W. Abdella ST. Fig. 3
Tampa, Pl. 33607 (City/State/and Zip Code)
For further information concerning this matter, please call:
Yorkayers Copero at (873) 732 - 2938 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

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 Department of State: State Carriers Two.
SECOND:	The document number of the corporation (if known): 102000065043
THIRD:	The file date of the articles of incorporation was: $11/09/20021$
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.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
S	Signed this 15th day of December . 2004
Signature	(By a director, president or other officers 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.)
	(Typed or printed name of person signing)
	Divector President (Title of person sighing)
	(Title of person sighting) FILE Filling 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: State CARRIERS, INC.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
This porporation's FILED UNDER MY NAME WITHOUT MY AUTHONIZATION OR PRIOR KNOWLEDGE THE PARTSON WHO FILED IT IS HERRY NORMAN, at 10307 FEMDROOK In.
TAMPA , FT. 33674
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
3011 W. Abdella ST. TPA, II.
33607
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.
Yos Ays 75 Cepevo Printed Name of the Person Filing Pignafure of the Person Filing

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