P02000068327

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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: DISSOLUTION OF SPACE	E COAST PESIENS INC
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee are submitted for	or filing.
Please return all correspondence concerning this matter to the	following:
(Name of Contact Person)	
SPACE COAST DESIGN. (Firm/Company)	٠ .
(Firm/Company)	
529 FRANKLYN AVE. (Address)	
(Address)	
TNDIA LANTIC CL 329 (City/State and Zip Code)	703
(City/State and Zip Code)	
For further information concerning this matter, please call:	
LEE SANFORD at (321	254-1410
(Name of Contact Person) (Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$	Certificate of Status &
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 Sta SPACE GAST DESIGNS, INC.	ite:			
SECOND:	The document number of the corporation (if known): P0200006832	7			
THIRD:	The file date of the articles of incorporation: JUNE 20, 2002				
FOURTH:	(CHECK AT LEAST ONE BOX)				
	None of the corporation's shares have been issued.	SECRI TALLA	07 NO		
	The corporation has not commenced business.	RETARY AHASSI	7 NOV -7		
FIFTH:	No debt of the corporation remains unpaid.	EE, F			
SIXTH:	No debt of the corporation remains unpaid. The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. Adoption of Dissolution (CHECK ONE)	STATE	AM 8: 57		
SEVENTH:	Adoption of Dissolution (CHECK ONE)				
	A majority of the incorporators authorized the dissolution.				
	A majority of the directors authorized the dissolution.				
Sign	(By a director, president of other officer - if directors or officers have not been selected, by an incorpora in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	ator - if			
	LEE SANFORD				
•	(Typed or printed name of person signing)				
	(-), remaining,				
VRESIDENT					
	(Title of Person Signing)				

Filing Fee: \$35