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(Requestor's Name)	
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PICK-UP WAIT MAIL	
ு (Business Entity Name)	•
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

AHD155 011/11/09

COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: BUSINESS IS OUT	of Lopet			
DOCUMENT NUMBER: POZOOOO M 3 M M				
The enclosed Articles of Dissolution and fee are submi	itted for filing.			
Please return all correspondence concerning this matter	to the following:			
CHACKO ABRAHAM (Name of Contact Pers	son)			
ST. JUDE TRUCKING I				
(Firm/Company)				
1914 ABBEY TRACE	DR.			
(Address)				
Dover, FLORIDA - 33 (City/State and Zip C	(odé)			
For further information concerning this matter, please c	an:			
	3/3), <u>654 · 7937</u> Arca Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
▼\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 F Certificate of Status Certified (Additional enclosed)	Copy Certificate of Status & Certified Copy			
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 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:		
	ST. JUDE PRUCKING INC.		
SECOND:	The document number of the corporation (if known): Popoco 7.37	7/7	
THIRD:	The date dissolution was authorized: 8.17-2009		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution to the control of the con	île date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes east f was sufficient for approval.	or dissolution	
	Dissolution was approved by of the shareholders through voting groups.		
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ntitled	
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by	SECRETARY OF STATE TALLAHASSEE, FLORIDA 16 PM 2: 01	
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	LORIDA 2:01	
	CHACKO ABRAHAM		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35