P02000079528

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TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: Paradise Press & Associates, Inc. **DOCUMENT NUMBER: P02000079528** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Harriet F. Youman (Name of Person) Paradise Press & Associates, Inc. (Name of Firm/Company) 16950 Apopka Springs Blvd. (Address) Montverde, Florida 34756 (City/State/and Zip Code) For further information concerning this matter, please call: Harriet F. Youman) 905-6296 at (407 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: **12**\$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 409 E. Gaines Street Tallahassee, Florida 32399 Tallahassee, Florida 32314

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:
-	Paradise Press & Associates, Inc.
SECOND:	The document number of the corporation (if known): P02000079528
THIRD:	The file date of the articles of incorporation was: July 22, 2002
FOURTH:	(CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued.
	None of the corporation's shares have been issued.
	The corporation has not commenced business. No debt of the corporation remains unpaid.
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.
	Signed this 20 day of april 2004.
Signat	(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.)
	Harriet F. Youman (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: Paradise Press & Associates, 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: Printed name of person filing claim, name of the claimant's business organization, Street mailing address, city, state, zip code, Area code and daytime telephone number, nature of the claim, date of claim, amount of claim, all legal documentation supporting the claim, the social security number, birthdate, current state driver's license, occupation, and signature of the person, filing claim. The claimant must submit any and all documents relating to the claim that may be requested by attorneys of the dissolved corporation, listed above. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Paradise Press & Associates P.O. Box 680759 Orlando, Florida 32868 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. Howset J. Vouman Signature of the Person Filing Harriet F. Youman Printed Name of the Person Filing

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