	~	
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
	Office I Ise Onl	v

DOC EXAM



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May 29, 2003

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Dear Sir or Madam:

I am enclosing my check in the amount of \$35 for the filing fee for the articles of dissolution.

I am also enclosing the Articles of Dissolution with information, and signed by me.

You may contact me at my home address or by telephone listed below.

90 Edgewater Drive Apt. 720

Coral Gables, Florida 33133

Telephone: 305-666-6364 or 305-505-4705 cellular

Yours truly,

**Michael Brooks** 

## FILED

## ARTICLES OF DISSOLUTION

03 JUN -2 PM 2: 06

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following SEE, FLORIDA articles of dissolution:

FIRST:	The name of the corporation is: BROOKS AVIATION, INC.		
SECOND:	The filing date of the articles of incorporation was: 13 th of August, 2002		
THIRD:	(CHECK ONE)		
	None of the corporation's shares have been issued.		
	The corporation has not commenced business.		
FOURTH:	No debt of the corporation remains unpaid.		
FIFTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.		
SIXTH:	Adoption of Dissolution (CHECK ONE)		
	A majority of the incorporators authorized the dissolution.		
	A majority of the directors authorized the dissolution.		
Sig	gned this 18 day of March , 2003		
Signatur	(By the chairman or the chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)		
	Michael Brooks  (Typed or printed name)		
	President		