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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

To 2/1/000 Diss/Inachue

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: ARTICLES of Dissolution of A FLORIDA PROFIT CORPORATION		
DOCUMENT NUMBER: P0200098703		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
MAKTHA LONG (Name of Contact Person)		
Action Butt, INC (Firm/Company)		
8 Emerahd LAKE Court (Address)		
(Address) PALM Coast FL, 32/37 (City/State and Zip Code)		
For further information concerning this matter, please call:		
MANTHA LONG at (386) 439-7448 (Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\times \$\times \$43.75 Filing Fee & Certificate of Status \$\times \$\tim		
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: Action Butt, INC. The document number of the corporation (if known): PO2 0000 98 70 3 SECOND: 2-1-2006 The date dissolution was authorized: THIRD: Effective date of dissolution if applicable: 2-10-2006 (no more than 90 days after dissolution file date) FOURTH: Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by of the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve: 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 an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) Donald B Long SR
(Typed or printed name 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: Action Butt, 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:
1) Punchase order number + date 2) Authorizing person 3) Description of services or products
a Authorizing person
3) Description of services or products
<u></u>
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
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.
Don And B hong SR Um R. Signature of the Person Filing Printed Name of the Person Filing Signature of the Person Filing
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Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00