P02000127599

(Requestor's Name)		
(Address)	50014	
(Address)		
(City/State/Zip/Phone #)	03/26/0	
(Business Entity Name)	·	
(Document Number)	:	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
	EFFECTIVE DATE 4-15-09	

Office Use Only



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03/26/09--01008--015 **35.00

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SECRETARY OF STATE
TALL AHASSEF, FLORID.

Diss. W/Notice 3/27/09

COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: Intent to dissolve FL Co	orporation
DOCUMENT NUMBER: P02000127	599
The enclosed Articles of Dissolution and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Eddy Mathieu	
(Name of C	Contact Person)
Tax Factor, Inc.	
(Firm/	/Company)
11200 NW 39th Court	
(Add	dress)
Coral Springs, FL 33065	
	e and Zip Code)
For further information concerning this matte	er, please call:
Eddy Mathieu	at (954) 358-8708
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	t:
▼\$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$\$ Certified Copy (Additional copy is enclosed)
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:			
	Tax Factor, Inc.	_		
SECOND:	The document number of the corporation (if known): P0200012759	9		
THIRD:	The date dissolution was authorized: 02/28/2009			
	Effective date of dissolution if applicable: 04/15/2009			
FOURTH:	Dissolution was approved by the shareholders. The number of votes c			tion
	was sufficient for approval. Dissolution was approved by the shareholders through voting groups.		FECTIV 4-1:	ve dati 5-09
	The following statement must be separately provided for each voting grout to vote separately on the plan to dissolve:	up entitl	ed	
	The number of votes cast for dissolution was sufficient for approval by	SECR	2009 MAR 26	.company
	(voting group)	HASSEE.FI		
	Signature: (By a director, president or other officer - if directors or officers have not been selected, an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, that fiduciary)		AH 10: 4 1	
	Eddy Mathieu (Typed or printed name of person signing)	_		
	CEO			
	(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: Tax Factor, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
The name of persons that are privy to the claims. Claimants must be ready
to present original copies of the claim documents.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
1915 NE 45th Street
Suite 102
Ft Lauderdale, FL 33308
P. 954.358.8708
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.
Eddy Mathieu
Printed Name of the Person Filing Signature of the Person Filing

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