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SECRETARY OF STATE.

FIFD

TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Hipskind Properties/Articles of Dissolution
DOCUMENT NUMBER: P0300050742
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jason Hipskind (Name of Person)
Hipskind Properties, Inc. (Name of Firm/Company)
3329 Songbird Lane (Address)
Lakeland, FL 33811 (City/State/and Zip Code)
For further information concerning this matter, please call:
Jacon Hipskind at (863) 412-0150 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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:			
	Hipskind Properties, Inc.			
SECOND:	The document number of the corporation (if known): PO 30000 5074.	<u>2_</u>		
THIRD:	The file date of the articles of incorporation was: 5-7-03		04 001	
FOURTH:	(CHECK AT LEAST ONE BOX)		27 25	-
	None of the corporation's shares have been issued.	1035 40 A	25 PM 2: 07	1
	The corporation has not commenced business.	STAT	2: 0:	
FIFTH:	No debt of the corporation remains unpaid.	Ε DA	-1	
SIXTH:	The net assets of the corporation remaining after winding up have been distribute to the shareholders, if shares were issued.	ıted		
SEVENTH:	Adoption of Dissolution (CHECK ONE)			
	A majority of the incorporators authorized the dissolution.			
	A majority of the directors authorized the dissolution.			
	Signed this 22 day of October 2004.			
Signatu	re: (By a director, president or other officer - if directors or officers have not been selected, by an incorporal just in the handy of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	itor –		
4	Jason Hipskind (Typed or printed name of person signing)			
	President Director			

Filing Fee: \$35