## P03000054423

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION OF TRAKSOFF INC.
DOCUMENT NUMBER: P0300052423
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
GARY A. HARRIS
(Name of Person)
TRAKSOFT INC.
(Name of Firm/Company)
P O Box 6652 (Address)
LAKELAND FL 33807 (City/State/and Zip Code)
(City/State/and Zip Code)
For further information concerning this matter, please call:
GAM A HARRIS at (863) 370-7242
(Name of Person) at (863) 370-7242 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\sum \square \
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section
Division of Corporations  P.O. Box 6327  Division of Corporations  409 E. Gaines Street
Tallahassee, Florida 32314 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 the Florida Department of State: TRAKSOFT, INC. The document number of the corporation (if known): P03000052423 SECOND: The file date the articles of incorporation: MAY 13, 2003 THIRD: FOURTH: (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid, The net assets of the corporation remaining after winding up have been distributed SIXTH: to the shareholders, if shares were issued. Adoption of Dissolution (CHECK ONE) SEVENTH: A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signed this 13 day of AUGUST 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.) GARY A. HARRIS

(Typed or printed name of person signing) DIRECTOR

Filing Fee: \$35

(Title of person signing)