P03000081278

(Requestor's Name)	
, .	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
·	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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TALLAHASSEE, FI ORINA

2) 23/m

COVER LETTER

TO: Amendment Section Division of Corporations	•
SUBJECT: ABO ARMAN	o, inc
DOCUMENT NUMBER: PO3000	81278
The enclosed Articles of Dissolution and fee are submitted	ted for filing.
Please return all correspondence concerning this matter t	o the following:
	1-
Cape Coral Tax & Accounting Services, LL 1611 Santa Barbara Blv Suite E Cape Coral, FL 33991	
(Address)	
(City/State and Zip Co	ode)
For further information concerning this matter, please ca	II:
$\frac{\text{Bill Anter}}{\text{(Name of Contact Person)}} \text{ at } (\frac{3}{\text{(A)}})$	rea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\bigcup \$43.75 Filing Fee & \$\bigcup \$43.75 Filing Fee & Certified C (Additional enclosed)	copy is Certified Copy
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 607.1401, 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:
ABU ARMAN, INC.
SECOND The document number of the corporation is as follows:
P03000081278
THIRD The file date of the articles of incorporation:
7/24/2003 ALLAH
7/24/2003 FOURTH: (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH TOURTH: (CHECK AT LEAST ONE BOX) FIFTH TOURTH: (CHECK AT LEAST ONE BOX) FIFTH TOURTH: (CHECK AT LEAST ONE BOX) FIFTH
No debt of the corporation remains unpaid.
SIXTH The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution.
Signature: Superior Superior Superior Signature: Signature: Superior Superi
SACVE Bourghoutin (Typed or printed name of person signing) 10 0000000000000000000000000000000000

President
(Title of Person Signing)

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:

ABU ARMAN, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State January 19, 2009, whichever is sooner.

Description of information that must be included in a claim:

- Amount owed
- Copy of signed invoice or Bill or other proof or services solicited or performed
- Claimant name & Address
- Tax ID number

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

3450 Fowler Street Ft. Myers, FL 33901

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.

Icuc Banghouth

Printed Name of the Person Filing

Signature of the Person Filing

FILED

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