P03000/06/55

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	∌#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION OF PROFIT CORPORATION
DOCUMENT NUMBER: Po 3000 106 155
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CAROLE TAORMINA (Name of Contact Person)
AFFILIATED STOCK TRANSFER COMPANY, INC.
710 POWDERHORN CIRCLE (Address)
LAKE MARY, FLORIDA 32746 (City/State and Zip Code)
For further information concerning this matter, please call:
CHROLE TADRMINA at (407) 766-2846 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Stiling Fee Status Certified Copy Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

11 APR 22 PM 1: 16

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the to articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	AFFILIATED STOCK TRANSFER COMPANY, IN		
SECOND:	The document number of the corporation (if known): P03000106 155		
THIRD:	The file date of the articles of incorporation:		
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.		
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.		
	/		
Sign	ature: (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.)		
	CAROLE TAORMINA (Typed or printed name of person signing)		
	PRESIDENT		

Filing Fee: \$35

(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: AFFILIATED STOCK TRANSFER COMPAND.
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:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
CAROLE TAORMINA 710 POWDERHORN CIRCLE
LAKE MARY, FL 3274L
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.
CAROLE TAORMINA Printed Name of the Person Filing Carole Taormine Signature of the Person Filing