

Division of Corporations Public Access System

## **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000279077 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. propries and a supply to the end of a super term of company to the second of the super sup

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257 Phone

: (850)224-8870

Fax Number 1 (850)222-1222

## DISSOLUTION OR WITHDRAWAL

BLIND WIZARD TOO, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 54 2008 11:22AM

## 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:  BLIND WIZARDTOO, INC
SECOND:	The document number of the corporation (if known): POSO00112331
THIRD:	The date dissolution was authorized: DECEMBER 33, 2008
	Effective date of dissolution if applicable: DECEMBER 31. 2008 (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
•	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	Ral Louis
	(voting group)
3	ignatures PDD lower
	(By a director, president or other officer - if directors at officers have not been selected, by an incorporator - if in the hands of a receiver, mustre, or other court appointed fiduciary, by that fiduciary)  Plan' L / O V > O  (Typed or printed mane of person algring)  (Title of nature siming)
حِ	Plain IOVAD
	(Typed or printed) name of person algring)
×	President
_	(Tide of person agring)

Filing Fee: \$35

, E 'd NO: 0002

CAPITAL CONNECTION

DEC. 24. 2008 11:22AM