P03000113007

(Re	equestor's Name)	
(Address)		
(Address)		
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DIVISION OF CORPORATIONS

OR INN -5 PM 2: 21

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: James Sanford Design, Inc		
DOCUMENT NUMBER: P03000113007		
The enclosed Articles of Dissolution and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
James Sanford		
(Name of Contac	t Person)	
James Sanford Design, Inc.		
(Firm/Company)		
7719 33rd Ave N		
(Address)		
St. Petersburg, Fl. 33710		
(City/State and	Zip Code)	
For further information concerning this matter, ple	ease call:	
James Sanford	t (727) 515-0800	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Cert (Add	.75 Filing Fee & S52.50 Filing Fee, iffied Copy litional copy is losed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section Division of Corporations	STREET ADDRESS: Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporations of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: James Sanford Design, Inc. The document number of the corporation (if known): P03000113007 SECOND: 1 The date dissolution was authorized: _12-20-2008 THIRD: 12-29-2008 Effective date of dissolution if applicable: (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 (voting group) Signature: dent or other officer - if directors or officers have not been selected, by incorporator - if In the hands of a receiver, trustee, or other court appointed fiduciary, by that flduciary) James Sanford (Typed or printed name of person signing)

Filing Fee: \$35

(Title of person signing)

president

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: _James Sanford Design, Inc. 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: Invoice Date Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 7719 33rd Ave N St. Petersburg, Fl. 33710 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. James Sanford Printed Name of the Person Filing