P03000117113

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NILLAHASSEE FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Cherished Gifts INC
DOCUMENT NUMBER: <u>P03000117113</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Douglas Sankary (Name of Person)
Cherished Gifts INC (Name of Firm/Company)
P.O. BOX 213492 (Address)
RoyalPalm Beach 33421 (City/State/and Zip Code)
For further information concerning this matter, please call:
Douglas Sankary at (631) 384-632 \$2 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

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:
	Cherished Gifts Inc
SECOND:	The document number of the corporation (if known): Po3000117/13
THIRD:	The date dissolution was authorized: 8/2/05
	Effective date of dissolution if applicable: 8/10/05 (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 of the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled 5-10-0 to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	Board or Directors (voting group)
	Signed this Z day of August, P. S.
	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)
	Souglas Sankary (Typed or printed name of person signing)
	President (Title of person signing)

Filing Fee: \$35