P03000130102

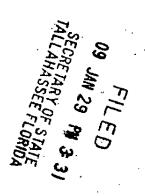
(Requestor's Name)			
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COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: <u>P03000130102</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ROBERT MUNDY (Name of Contact Person)
Rycor Construction Inc (Firm/Company)
Green (o/e Springs FL 32043 (City/State and Zip Code)
For further information concerning this matter, please call:
ROBERT Mundy at (904) 415, 2246 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\ \text{S52.50 Filing Fee.} \ \text{Certificate of Status} \ \text{Certified Copy} \ Certified
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	f State:		
	Rycor Construction, Inc.	-		
SECOND:	The document number of the corporation (if known): POBOOOL	301	02	2_
THIRD:	The file date of the articles of incorporation: <u>TAN.1, 2003</u>			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	None of the corporation's shares have been issued.	SECR!	09 J	
	The corporation has not commenced business.	ETAR) HASSI	AN 29	Ī
FIFTH:	No debt of the corporation remains unpaid.	OF S	2	ן כ
SIXTH:	The net assets of the corporation remaining after winding up have been distrib to the shareholders, if shares were issued.	AGE	3 32	
SEVENTH:	Adoption of Dissolution (CHECK ONE)			
	A majority of the incorporators authorized the dissolution.			
	A majority of the directors authorized the dissolution.			
Signa	ature: PHMJ			
	(By a director, president or other officer - if directors or officers have not been selected, by an incomin the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	orporator -	if	
	ROBERT K. Mundy (Typed or printed name of person signing)			
	Resident (Title of Person Signing)			

Filing Fee: \$35