P030004286/

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Articles of Dissol	ution - Monmy's Place Inc
DOCUMENT NUMBER: P03000	142861
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
Vicky Valdes (Name of Conta	act Person)
monny's Place Inc (Firm/Cor	
7435 SW 164 Stre	<u>ret</u>
1 Miani, FL 33150 (City/State and	1 Zip Code)
For further information concerning this matter, p	lease call:
Vicky Valdes (Name of Contact Person)	at (305) 256-7874 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Ce (Ac	#3.75 Filing Fee & S52.50 Filing Fee, Pertified Copy Idditional copy is aclosed) #3.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
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 Sta	ite:		
	Monny's Place Inc.			
SECOND:	The document number of the corporation (if known): P0300014286	.1		
THIRD:	The file date of the articles of incorporation: $12-02-2003$			
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.			
	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	T _w	-	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	ECRE	HAL B	
	A majority of the incorporators authorized the dissolution.	IARY IASSE	29	FILED
	A majority of the directors authorized the dissolution.	RETARY OF STATE AHASSEE, FLORIDA	PH 2: 25	<u>'</u>
Sign	ature: (By a director, resident or other officer - if directors or officers have not been selected, by an incorpora in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	ator - if		
	Vicky Valdes (Typed or printed name of person signing)			
	Resident (Title of Person Signing)			

Filing Fee: \$35