## P03000147214

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					



000061268660

11/18/05--01009 -- 003 \*\*50,50

PILED

OS NOV 18 AM ... OO

## **COVER LETTER**

TO: Amendment Section	
Division of Corporations	
SUBJECT: Watson Networks, Inc	Articles of Dissolution
DOCUMENT NUMBER: P03000147	214
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
William Drew	
(Name of	Contact Person)
Watson Networks, Inc.	
(Fire	m/Company)
207 SE 2nd PL STE I1	
(A	ddress)
Gainesville, FL 32601	
	tte and Zip Code)
For further information concerning this ma	tter, please call:
William Drew	at (_954 ) 873-4650
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	int:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section 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 corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:						
	Watson Networks, Inc.						
SECOND:	The document number of the corporation (if known): P03000147214						
THIRD:	The date dissolution was authorized: 11/15/2005						
	Effective date of dissolution <u>if applicable:</u> (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 to vote separately on the plan to dissolve:						
	The number of votes cast for dissolution was sufficient for approval by  (voting group)						
	(voting group)						
	FLORIDE TO THE PROPERTY OF THE						
	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)						
	William Drew						
	(Typed or printed name of person signing)						
	President						
•	(Title of person signing)						

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by	the dissolved corporation	on named below	for resolution o	f payment of	unknown cla	ims
against this corporation as						

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Watson Networks, 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: Name Company Name Contact Information (Physical Address, E-Mail Address, Telephone Number) Attorney Information The Cliam Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) P.O. BOX 1022 Gainesville, FL 32602-1022 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. William Drew

Signature of the Person Filing

Printed Name of the Person Filing