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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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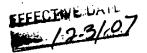
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: BOB SUPINA, 1	Nc.
DOCUMENT NUMBER: PO3000 149	
The enclosed Articles of Dissolution and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	eer to the following:
ROBERT D. SUPINA	
(Name of Contact P	erson)
(Firm/Compan	y)
S500 CHRONICLE COURT	
(Address)	
JACKSONVICCE, FL 32Z (City/State and Zip	56 -8284
(City/State and Zip	Code)
For further information concerning this matter, please	e call:
Bob Supina at ((Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
	cd Copy Certificate of Status & Certified Copy
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 607.1403, 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: Boz Suring INC.			
SECOND	002-00 440202			
THIRD:	The date dissolution was authorized:			
	Effective date of dissolution if applicable: 12 - 31 - 2007 (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 dissolutio 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: (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)			
	ROBERT D. SUPINA			
	(Typed or printed name of person signing)			
	Pars, VP, Sec, The			

Filing Fee: \$35