P03000154570

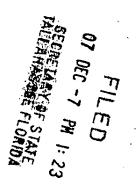
(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: DISSOLUTIO	N OF CORPORATIO	
DOCUMENT NUMBER: P03000	154570	
The enclosed Articles of Dissolution and fee are submit	ted for filing.	
Please return all correspondence concerning this matter t	o the following:	
Jerona (1) F	, NKOB	
Name of Contact Person) Kor	
WESTPORT ATLANTIC	CORPORATION_	
(Firm/Company)		
P.A. Box 57		
P. A. Box 57 (Address)		
KEY Colony BEACH, FL., (City/State and Zip Co		
KEY COLONY BEACH, FL.	33051	
(City/State and Zip Co	de)	
For further information concerning this matter, please ca	III·	
. v	 -	
- O:	_	
Terone Pikor at (3) (Name of Contact Person) (A	05) 289-0111	
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Class Ellis B. Class Services		
\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & Certified C		
(Additional		
enclosed)	(Additional copy is	
	enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee. FL 32314	Clifton Building 2661 Executive Center Circle	
1 alialiassee. I'l 34314	ZOOT EXECUTIVE CEMET CITCLE	

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:		
	WESTPORT ATLAUTIC CORPORATION		
SECOND:	The document number of the corporation (if known): P03000154570		
THIRD:	The date dissolution was authorized: 12.4.07		
	Effective date of dissolution if applicable: (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 the shareholders through voting groups.		
The following statement must be separately provided for each voting group entitle to vote separately on the plan to dissolve:			
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
Ki	gnature:		
	(By director, president of 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)		
_	Terome (D) PIKOP (Typed or printed name of person signing)		
_	PRESIDENT (Title of person signing)		

Filing Fee: \$35