P0400002237

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: DISSOLUTION Of C	orporation			
DOCUMENT NUMBER: P0400002237				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
CRUSTAL Cappadoro)			
(Name of Contact Person)				
(Firm/Company)				
17454 46 COURT N. (Address)				
Loxahatchee, FL 33470 (City/State and Zip Code)				
For further information concerning this matter, please call:				
CRUSTAL CAPPADORO at (5) (Name of Contact Person) (A)	Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certified (Additional enclosed)	Copy Certificate of Status & Certified Copy			
MAILING ADDRESS:	STREET ADDRESS:			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	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:	ST: The name of the corporation as currently filed with the Florida Department of State:					
	Flickner Enterprises, INC.					
SECOND:	The document number of the corporation (if known): PO40000223	[
THIRD:	The file date of the articles of incorporation: 12 22 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.					
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.					
SEVENTH:	: Adoption of Dissolution (CHECK ONE)					
	A majority of the incorporators authorized the dissolution.	; ; [FIFD			
	A majority of the directors authorized the dissolution.	2 3 3 3	T D			
Sign	nature: (Hy a Rivertor, 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.)	,				
	Jay J. Flickule (Typed or printed name of person signing)					
	Director (Title of Person Signing)					

Filing Fee: \$35

September 1, 2006

To whom it concerns,

This letter shall serve as official record that my corporation, Flickner Enterprise, Inc. is no longer in business. I do hereby certify that I was the sole owner of said business and was self employed through said business.

This business has not generated any income since August 1, 2006. Therefore I have not had any income effective August 1, 2006. I have been unable to work since the above mentioned date, and according to my doctors, will remain unable to work at any time in the future. My doctor, Dr. A. Kuruvilla, MD, FACRO from the North Florida Cancer Center (386) 758-7822 has deemed me disabled affective from the date mentioned above.

Should you have any question, please contact me at (386) 935-6803.

Sincerely,

lav J. Flickner