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(Ře	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	⇒ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

_	Amendment Section Division of Corporations	
SUBJE	ECT: Dissolution of Corpora	iteon
DOCU	MENT NUMBER:	
The end	closed Articles of Dissolution and fee are submitted fo	r filing.
Please	return all correspondence concerning this matter to the	following:
	COLLEEN ARGO	
	(Name of Contact Person)	
	(Firm/Company)	
	• • •	
	5830 NW 17th TERR (Address)	ACE
	PARKLAND FL BBOOK (City/State and Zip Code)	32001
For fur	rther information concerning this matter, please call:	
	OLLEEN ARGOV at (954) 733 5009 ode & Daytime Telephone Number
	(Name of Contact Person) (Area C	ode & Daytime Telephone Number
Enclose	ed is a check for the following amount:	
□\$35	Filing Fee \$\sum \$\\$43.75\$ Filing Fee & \$\sum \$\\$43.75\$ Filing Fee & Certified Copy (Additional copy enclosed)	Cee & \$\int \\$52.50\$ 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:

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60,00

Filing Fee: \$35