P04000042564

· (Re	equestor's Name)	
. (Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	. (+)
PICK-UP	_	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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Ant D135 May 4.11.08

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: PO400043564
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Raymond George (Name of Contact Person)
The True Celors Pointing (Firm/Company)
Address) (Address) (City/State and Zip Code)
City/State and Zin Code)
For further information concerning this matter, please call:
Rouprond Leo y at (352) 726-7553 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) \$\bigcup \\$35 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS: Amandamant Soution
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 20, 2008

RAYMOND GEORGE 204 N. DAVIDSON AVE INVERNESS, FL 34450

SUBJECT: THEE TRUE COLORS, INC.

Ref. Number: P04000042564

We have received your document for THEE TRUE COLORS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We can find no record of the entity named in your document. A computer printout of a similar named entity is enclosed for your review. If this is the right name, please correct your document and return it for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 008A00016833

PECEINED

MOB APR 11 AM 8: 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to s	section 607.1403, Florida Statutes, this Florida profit corporation submits the follon:	lowing articles
ated)		
FIRST:	The name of the corporation as currently filed with the Florida Department of	State:
<u> </u>	hec True Colors Pointing to Patrician	Inc.
SECOND:	The document number of the corporation (if known): PO4000042	.564
THIRD:	The date dissolution was authorized: 12-31-07	
	Effective date of dissolution if applicable: 12-31-57 (no more than 90 days after dissolution for the properties of the	ile date)
FOURTH:	Adoption of Dissolution (CHECK ONE)	•
	Dissolution was approved by the shareholders. The number of votes cast f was sufficient for approval.	or dissolution
	Dissolution was approved by the shareholders through voting groups.	
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ntitled
	The number of votes cast for dissolution was sufficient for approval by	므
		SECR VISIO
	(voting group)	PR I
		Daph Ores
		SECRETARY OF STATE WISION OF CORPORATION
5	Signature Maynor Levy	6 35
	(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)	
	PAYMOND George (Typed or printed hame of person signing)	
	President	
	(Title of person signing)	

Filing Fee: \$35