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Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
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CO 1-1105

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: Disolving CORP				
DOCUMENT NUMBER:				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Molly ONe, II  (Name of Contact Person)				
(Name of Contact Person)				
(Firm/Company)				
333 LAS OLAS WAY #23/0 (Address)				
·				
FORT LAUDERDALE FL 3330/ (City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (954) 467 3007 (Name of Contact Person) (Area Code & Daytime Telephone Number				
(Name of Contact Person) (Area Code & Daytime Telephone Number	r)			
Enclosed is a check for the following amount:				
\$35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \bigsquare \\$43.75 Filing Fee & \bigsquare \\$52.50 Filing Fee,  Certificate of Status & Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)				
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section				
Division of Corporations 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 607.1403, Florida Statutes, this Florida profit corporation submits the following articles

of dissoluti	ion:	
FIRST:	The name of the corporation as currently filed with the Florida Department State	
	Molly O'Noil INTERIORS INC	F-1
SECOND:	70~	3
THIRD:	The date dissolution was authorized: 12/31/06	بي <sub>أ</sub> َرِ
	Effective date of dissolution if applicable: 12/3/06 (no more than 90 days after dissolution file days)	ite)
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast for dwas sufficient for approval.	issolution
	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:	:d
	The number of votes cast for dissolution was sufficient for approval by	
	(voting group)	
	Signature:  (By a 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)	
	(Typed or printed name of person signing)	
	PKESIDE WT (Title of person signing)	

Filing Fee: \$35