(Re	questor's Name)	
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(Document Number)		
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05/13/04--01060--001 **35.00

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: TM Marketing Enterprises Inc.
DOCUMENT NUMBER: P0400055649
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
(Name of Person) TM Marketing Enterprizes (nC (Name of Firm/Company)
5530 metravest Blud # 208
Orlando ft 32811
(City/State/and Zip Code)
For further information concerning this matter, please call:
Cristing Hdz at (407) 25/7180 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with Department of State: TM Marketing Enterprises Inc	<u>-</u>	-
SECOND:	The document number of the corporation (if known): PO 400 00	556	19
THIRD:	The file date of the articles of incorporation was: $\frac{3}{3109}$	<u>.</u>	
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.		
	The net assets of the corporation remaining after winding up have been distribt to the shareholders, if shares were issued.	5 5 E	، •
SEVENTH:	Adoption of Dissolution (CHECK ONE)	MAY!	<u> </u>
	A majority of the incorporators authorized the dissolution.	MAY 12 PM CRETARY OF AHASSEE, F	ווידרוו
	☐ A majority of the directors authorized the dissolution.	Y OF STATE EE, FLORIDA	,)
	Signed this 10th day of May	<u>.</u>	ے
Si	ignature: (By a director, president or other officer - if directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) Tal Etgay (Typed or printed name of person signing)	incorporator	• if
	(Title of person signing)		

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S. This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00