## P0400061017

(Re	equestor's Name)	
`		
(Ac	ldress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>; #)</del>
PICK-UP	WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## TRANSMITTAL LETTER

FO: Amendment Section		
Division of Corporations		
•		
SUBJECT: Ellicam, Inc.		
DOCUMENT NUMBER: 80400061017		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
MARK SMITH		
(Name of Person)		
(Name of Firm/Company)		
1323 Club House Dr. (Address)		
(Address)		
Chesaceake NA 23322		
Chesapeake VA Z332Z (City/State/and Zip Code)		
or further information concerning this matter, please call:		
of future information concerning and matter, please can.		
MARKSMITH at ( 757 ) 377-3684		
(Name of Person) (Area Code & Daytime Telephone Nu	ımber)	
inclosed is a check for the following amount:		
\$35 Filing Fee \$\omega\$43.75 Filing Fee & \$\omega\$\$43.75 Filing Fee & \$\omega\$\$\$52.50 Filing Fee		
1 \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status	•	
(Additional copy is Certified Copy		
enclosed) (Additional copy i enclosed)	is	
* MAILING ADDRESS: STREET ADDRESS:		
Amendment Section Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327  Division of Corporations 409 E. Gaines Street		
Tallahassee, Florida 32314 Tallahassee, Florida 3239	9	

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Department of State:
	Ellicam, Inc.
SECOND:	The document number of the corporation (if known): Poy occorporation   State    The date dissolution was authorized: August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date dissolution was authorized:   August 31, 2005   State    The date   August 31, 2005   State    Th
THIRD:	The date dissolution was authorized:  August 31, 2005  Effective date of dissolution if applicable:  August 31, 2005
	Effective date of dissolution if applicable: August 31, 7005 (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	☐ Dissolution was approved by of the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group)
	Signed this,
Signat	(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)
	(Typed or printed name of person signing)
	(Title of person signing)

Filing Fee: \$35