## P04000063054

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SEGRETARY OF STATE
TALLAHASSEE, FLORIG

diss. W/NOT.

C. Coulliette JUN 0 9 2006

## TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

Division of Corporation	S
SUBJECT: <u>KITCHEN DREM</u>	13 AND MORE IT, INC.
document number: Po 4	0000 63054
The enclosed Articles of Dissolution	n and fee are submitted for filing.
Please return all correspondence cor	cerning this matter to the following:
CARLOS VERI	460
(Na	me of Person)
KITCHEN DREAMS AND (Na	me of Firm/Company)
773 NW 167 ST	REET
	(Address)
MIAMI FL. 33/69	
(Cit	y/State/and Zip Code)
For further information concerning the	nis matter, please call:
(Name of Person)	at (305) 624-8223 (Area Code & Daytime Telephone Number
Enclosed is a check for the following	amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of Sta	
MAILING ADDRESS:	STREET ADDRESS:
A menament Section	Amenament Section

Division of Corporations

409 E. Gaines Street Tallahassee, Florida 32399

## 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:
	KITCHEN DREAMS AND MORE IT, INC.
SECOND:	The document number of the corporation (if known): P040000 63054
THIRD:	The date dissolution was authorized: 12-31-05
	Effective date of dissolution if applicable: 12-31-05.  (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.
٠	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 approva
·	(voting group)
	Signed this
	Signature:  (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)
	CARIOS VERDUGO (Typed or printed name of person signing)
	PRESIDENT (Title of person signing)

Filing Fee: \$35

## Notice of Corporate Dissolution

	of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution
Name of Corp	oration: KITCHEN DREAMS AND MORE IT, INC.
	ntion will be the date the dissolution is filed with the Department of State or as extricles of Dissolution.
escription of	information that must be included in a claim:
NAME, A	Thuoice, specific NATURE OF CLAIM.
ORIZINAL	THUOICE, SPECISIC NATURE OF CLAIM.
-	
ailing address	
ailing address	where claims can be sent: (Claims cannot be sent to the Division of Corporations)
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claim against t	where claims can be sent: (Claims cannot be sent to the Division of Corporations)  773 NW /67 STREET  MIAMI FL. 33/69  the above named corporation will be barred unless a proceeding to enforce the claim
claim against t	where claims can be sent: (Claims cannot be sent to the Division of Corporations)  773 NW /67 STREET  MIAMI FL. 33/69
claim against t	where claims can be sent: (Claims cannot be sent to the Division of Corporations)  773 NW /67 STREET  MIAMI FL. 33/69  the above named corporation will be barred unless a proceeding to enforce the claim
claim against t	where claims can be sent: (Claims cannot be sent to the Division of Corporations)  773 NW 167 STREET  MIAMI FL. 33/69  the above named corporation will be barred unless a proceeding to enforce the claim ithin 4 years after the filing of this notice.

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