## P04D00083598

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Special Instructions to	Filing Officer:	
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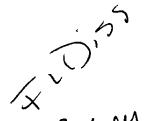
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SECRETARY OF STATE
ANASSEF, FLORIO



## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations .		
SUBJECT: Articles OF Dissolution		
DOCUMENT NUMBER: 204000083598		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
(Name of Contact Person)		
(Name of Contact Person)		
Kelor Management, Inc. (Firm/Company)		
601 NW 34 ST (Address)		
(1.143.1433)		
OAKLAND PARK FL 33309 (City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (954) 249-2009  (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$\text{\$\text{S}\$35 Filing Fee}\$ \bigcup \\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{Filing Fee}}\$}}}} \bigcup \\$\$\text{\$\$\text{\$\		
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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 dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	Kelcor Management, INC	
SECOND:	The document number of the corporation (if known): P040000 8 3 5 9 8	
THIRD:	The date dissolution was authorized: \[ \langle 2 - 29 - 200 7 \]	
	Effective date of dissolution if applicable: 12-29-2007 (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 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    Volume   SSECRETARY   SSECRETARY	
	NONE	
	Vo NE (voting group)   CRETARY OF STATE ORID)	
	ORINI ORINI ORINI	
	Signature: Alexe T	
	(By a director, president or other officer of 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)	
	(Typed or printed name of person signing)	
	Directon	
	(Title of person signing)	

Filing Fee: \$35