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SECRETARY OF STATE

C.COULLIETTE
JUN 17 2009

EXAMINER

## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution of Whoksale Ti	ransmissime Fra	
DOCUMENT NUMBER: \$ 04000 105 039		
The enclosed Articles of Dissolution and fee are submitted fo	r filing.	
Please return all correspondence concerning this matter to the following:		
Sandra Lawrence (Name of Contact Person)		
(Name of Contact Person)		
(Firm/Company)		
235 Pinehust Are		
235 Pinehurst Are (Address) Rensselaer N+ 12144		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Sandra Lawrence at (578) (Name of Contact Person) (Area C	) 434 2972 ode & Daytime Telephone Number)	
,	ode & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\bigsiz \\$43.75 Filing Fee \$\bigsiz \\$43.75 Filing Fe \$\bigsiz \\$43.75 Filing Fe \$\bigsiz \\$Certified Copy \$\text{(Additional copy enclosed)}\$	cee & \$\sumsymbol{\text{\$\subset\$}}\$\$\\$52.50 \text{ Filing Fee,} \\ \text{Certificate of Status & Certified Copy} \\ \text{(Additional copy is enclosed)} \end{array}	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 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 dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Wholesafe Transmissions Inc.
SECOND:	The document number of the corporation (if known): P 04000 105039
THIRD:	The date dissolution was authorized: 10/1/08
	Effective date of dissolution if applicable: 10/1/08 (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
	(voting group)
	OF STATE E. FLORID
	Signature: Dande (andre
	(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)
	Sandra Llawrence
	(Typed or printed name of person signing)
	VP
	(Title of person signing)

Filing Fee: \$35