P04000120045

(Red	questor's Name)	
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(City	//State/Zip/Phone	∌ #)
PICK-UP	WAIT	MAIL
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SECRETANT OF STALLAHASSEE, FLO

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COVER LETTER

TO: Amendment Section Division of Corporations	*1
SUBJECT: DISSOLUTION-ORLANDO EVENT PLANNER INC	
DOCUMENT NUMBER: PP04000120643	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
JAMES FRANK	
(Name of Contact Person)	-
ORLANDO EVENT PLANNER INC	
(Firm/Company)	
14733 SWEET ACACIA DR	
(Address)	
ORLANDO FL 32828	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	
JAMES FRANK at (407) 928-8078	
(Name of Contact Person) (Area Code & Daytime Telephone Number)	_
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\times \text{\$43.75 Filing Fee & } \tag{\$43.75 Filing Fee & } \tag{\$52.50 Filing Fee,} \tag{\$Certificate of Status & } \$Certified Copy & Certificate of Status & Certified Copy & Certified	
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:
	ORLANDO EVENT PLANNER, INC.
SECOND:	The document number of the corporation (if known): P04000120643
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.
	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
	Pro Pr
	(voting group) (voting group)
	Signature: Signature:
	(By 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)
	JAMES FRANK
	(Typed or printed name of person signing)
	PRESIDENT
	(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: ORLANDO EVENT PLANNER INC
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:
1. PERSON OR ENTITY FILING THE CLAIM
2. ORIGINAL DATE CLAIM WAS INCURRED
3. AMOUNT OF CLAIM
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
14733 SWEET ACACIA DR
ORLANDO FL 32828
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.
JAMES FRANK Printed Name of the Person Filing Signature of the Person Filing