## Poto00123556

(Req	luestor's Name)	
(Add	Iress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
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ROP 3/31/10

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: DISSOLUTION	
DOCUMENT NUMBER: PO4000123556	
The enclosed Articles of Dissolution and fee are submit	ted for filing.
Please return all correspondence concerning this matter to	to the following:
ANDRE L. LACHANCE	
(Name of Contact Person	on) .
MARKETING STRATEGIES AND SERVICE	ES
(Firm/Company)	
8379 S.E SANCTUARY DRIVE	,
(Address)	
HOBE SOUND, FLORIDA	
(City/State and Zip Co	ode)
For further information concerning this matter, please ca	all:
ANDRE L. LACHANCE at ( 3 (Name of Contact Person) (A	nrea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee (Additional enclosed)	l copy is Certified Copy
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 sarticles of di	AR A T
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	The document number of the cornoration (if known): P04000 123556
SECOND:	The document number of the corporation (if known): P04000 123556
THIRD:	The file date the articles of incorporation: <u>AUCUST 26, 2004</u>
FOURTH:	(CHECK AT LEAST ONE BOX)
•	None of the corporation's shares have been issued.
	☐ The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	☐ A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: Undre D. Vachanes
	(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.)
	ANORE L. LACHANCE (Typed or printed name of person signing)
	PRESIDENT (Title of Person Signing)
	( ) the of reison bighing)

Filing Fee: \$35