

P04000125738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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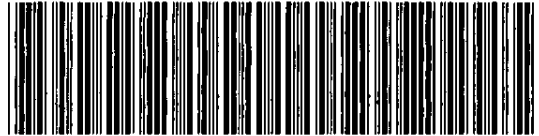
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLD155
*005
12/22/08

RICHARD KLOPFENSTEIN

13310 52ND COURT N
ROYAL PALM BEACH, FL. 33411

TELEPHONE: (561) 319-8443

12-03-08

Corporate Records Bureau
Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32314

Re: Dissolution of CORNERSTONE R.K., INC.

Dear Sir:

Enclosed is an original and a copy of the Articles of Dissolution for the above corporation.

Also enclosed is a check payable to the Secretary of State in the amount of \$43.75 representing a \$35.00 filing fee for the Articles of Dissolution, and \$8.75 for a Certificate of Status.

Very truly yours,

RICHARD KLOPFENSTEIN

ARTICLES OF DISSOLUTION

Pursuant to 607.1403, Florida Statutes, this corporation submits the following articles of dissolution:

- FIRST: The name of the corporation is CORNERSTONE R.K., INC.
Corporate number: P04000125738
- SECOND: The articles of incorporation were filed on 09-01-04.
- THIRD: The date dissolution was authorized was 12-03-08.
- FORTH: Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- FIFTH: The corporation has no intention of revoking this voluntary dissolution and its name is available for immediate use by any other corporation.

Signed this 12-03-08.

FURTHER AFFIANT SAYETH NAUGHT.


AFFIANT/RICHARD KLOPFENSTEIN, President/Chairman of the

Board

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TALLAHASSEE, FLORIDA

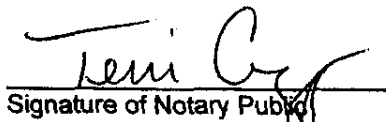
The foregoing instrument was acknowledged before me this 14th day of December 2008, by RICHARD KLOPFENSTEIN, who personally appeared, and known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he executed the same, that I relied upon the following form of identification of the above-named person[s]: **DRIVERS LICENSE OF** Richard Klopfenstein.

Witness my hand and seal at said county and state this 14th day of December, 2008

My commission expires



TERRI CAMIZZI
Commission DD 629455
Expires March 1, 2011
Recorded Time Troy Palm Insurance 600-885-7018


Signature of Notary Public

Terri Camizzi
Printed Name