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SECRETARY OF STAIL AHASSEE, FLORIDA



COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: DISOlution OF CJDION Inc.		
DOCUMENT NUMBER: P04000141335		
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)		
CJDION Inc. (Firm/Company)		
170 E.T-apnell Rd. (Address)		
Plant City FL 33566 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (813) 716-5900 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$\text{S52.50 Filing Fee,} \text{Certificate of Status} \text{Certified Copy} \text{Certified Copy is enclosed} \text{Certified Copy is enclosed} \text{Certified Copy is enclosed}		
MAILING ADDRESS: Amount Section		
Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

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Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation subness the following articles of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: CJDION, Inc. The document number of the corporation (if known): PO 4000 141335 SECOND: The file date of the articles of incorporation: October 13, 2004 THIRD: 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. The net assets of the corporation remaining after winding up have been distributed SIXTH: to the shareholders, if shares were issued. Adoption of Dissolution (CHECK ONE) SEVENTH: A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signature: (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.)

(Typed or printed name of person signing)

Pive Lov

(Title of Person Signing)

Filing Fee: \$35