Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000300768 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

; (850)617-6380

From: Carrie L. Ramos

: GRAYROBINSON, P.A. - ORLANDO Account Name

Account Number : I20010000078 : (407)843-8880 Phone

Fax Number

: (407)244-5690

DISSOLUTION OR WITHDRAWAL

ALPHA L SYSTEMS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

12/17/2007

https://efile.sunbiz.org/scripts/efilcovr.exe

P.02/03

FILED 407 418 6580 SECRETARY OF STATE DIVISION OF CORPORATIONS

H07000300768 3

2007 DEC 17 AM 9: 22

ARTICLES OF DISSOLUTION OF ALPHA L SYSTEMS, INC. a Fiorida Corporation

ARTICLE I - NAME

The name of this Corporation is Alpha L Systems, Inc.

ARTICLE II - DATE OF AUTHORIZATION OF DISSOLUTION

The dissolution of this Corporation was authorized on December 17, 2007 and is effective as of December 17, 2007.

ARTICLE III - SHAREHOLDER APPROVAL

Dissolution was approved by the sole shareholder of this Corporation and thereby the number cast for approval was sufficient within the meaning of Section 607.1403(1)(c), Florida Statutes.

ARTICLE IV - JOINT WRITTEN ACTION

Dissolution was approved by the sole Director and the sole Shareholder and was therefore sufficient for approval.

> ALPHA L SYSTEMS, INC., a Florida corporation

Name: Randy

Title: President

но7000300768 3

NOTICE OF DISSOLUTION

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in Section 607.1407, Florida Statutes.

NAME OF CORPORATION

Alpha L. Systems, Inc.

DATE OF DISSOLUTION

December 17, 2007

INFORMATION THAT MUST BE INCLUDED IN CLAIM

- 1. Name of Claimant
- 2. Address of Claimant
- 3. Amount of Claim(s)
- 4. Description of facts giving rise to Claim
- Claimant contact person and contact information

MAILING ADDRESS WHERE CLAIMS CAN BE SENT

Alpha L Systems, Inc. 250 Park Avenue South, Suite 310 Winter Park, Florida 32789

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within four (4) years after the filing of this notice.

ALPHA L SYSTEMS, INC., a Florida corporation

Name: Randy W. Frey

Title: President