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. COVER LETTER

TO: Amendment Section Division of Corporations	•
SUBJECT:	
DOCUMENT NUMBER:	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Dissolution and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	er to the following:
James J Vernuce (Name of Contact Po	4il Tik
5.5. V-5. 10c (Firm/Compan	
(Firm/Compan	y) ,
4/201 W Blue Herse (Address)	3(ycl
RIVIEVA Beach Flo	
For further information concerning this matter, please	
Tames Vernacchio at ((Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certific	Filing Fee & S52.50 Filing Fee, cd Copy Certificate of Status & Certified Copy (Additional copy is enclosed)
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

FILED

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: SECOND: The document number of the corporation (if known): The date dissolution was authorized: 3 0 7 - 0 9 THIRD: Effective date of dissolution if applicable: 3-02,09

(no more than 90 days after dissolution file date) Adoption of Dissolution (CHECK ONE) FOURTH: Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by 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 (voting group) Signature: (By a director, president or other officer - if directors or officers have not been selected, by antincorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) Tumes The Condition (Typed or printed name of person signing)

President

Filing Fee: \$35