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## **COVER LETTER**

SUBJECT: SHOPPING (NITH SANDY, /NI)  DOCUMENT NUMBER: POSOOOO/24  The enclosed Articles of Dissolution and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  ALAN N. FINGELSTIN, C. P. A.  (Name of Contact Person)  ALANN. FINGELSTIN, P. A.  (Firm/Company)  / O651 SW 88 TH ST. SUTA 207  (Address)  MIAMI FL 33 / 76  (City/State and Zip Code)  For further information concerning this matter, please call:  ALANN. FINGELSTIN, P. Att (305) 279 - 4400  (Name of Contact Person)  Enclosed is a check for the following amount:    S35 Filing Fee	TO: Amendment Section Division of Corporations		
The enclosed Articles of Dissolution and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  ALAN N. FINGELSTEIN, C. P.A.  (Name of Contact Person)  ALANN. FINGELSTEIN, P.A.  (Firm/Company)  10651 SW88 TH ST. SUITA 207  (Address)  MIAMI FL 33/76  (City/State and Zip Code)  For further information concerning this matter, please call:  ALANNI FINGELSTEIN, P. Pat (305) 279-4400  (Name of Contact Person)  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$\Begin{array} \text{STS Filing Fee} & \text{S43.75 Filing Fee} & \text{Certificate of Status} & \text{Certificate of Status} & \text{Certificate of Copy} & \text{(Additional copy is enclosed)} & \text{enclosed} & \text{STREET ADDRESS:} \\ Amendment Section \\ Division of Corporations \\ P.O. Box 6327  Cilfon Building	SUBJECT: SHOPPING	WITH SANDY, INC.	
Please return all correspondence concerning this matter to the following:    ALAN N. F.NGELSTEIN, C. P. A. (Name of Contact Person)	DOCUMENT NUMBER: POSOC	0000/124	
ALAN N. FINANCESTAIN, C. P.A.   (Name of Contact Person)   ALAN N. FINANCESTAIN, P.A.   (Firm/Company)   10651 SW 88 TH ST. SU174 207   (Address)   MAMINE AND FL 33/76   (City/State and Zip Code)   For further information concerning this matter, please call:   ALAN N. FINANCESTAIN, P.P. at (305) 279-4400   (Name of Contact Person) (Area Code & Daytime Telephone Number)   Enclosed is a check for the following amount:   \$35 Filing Fee  \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)   MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Clifton Building	The enclosed Articles of Dissolution and fee	e are submitted for filing.	
(Firm/Company)    10651 SW 88 TH ST. Su174 207 (Address)   MAMINE STAIN L.P. At (305) 279-4400 (Name of Contact Person) (Area Code & Daytime Telephone Number)   S35 Filing Fee Status	Please return all correspondence concerning t	this matter to the following:	
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(Firm/Company)    1065  SW 8874 ST. Su174 207		0 1	
(Address)  MAILING ADDRESS:  Amendment Section Division of Corporations P.O. Box 6327  (Address)  MIAMI FL 33/76  (City/State and Zip Code)  For further information concerning this matter, please call:  ALANN, FINTELSTAIN, I.P. at (305) 279-4400  (Area Code & Daytime Telephone Number)  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  (Additional Fee \$\bigcup \text{\$43.75 Filing Fee} \text{\$\bigcup \text{\$43.75 Filing Fee} \text{\$\infty} \text{\$\text{Certified Copy} \	HLANN. FIN	49CS791N, F. H.	
City/State and Zip Code		• • •	
City/State and Zip Code)  For further information concerning this matter, please call:  ### Plan No Five State   Plat   305   279 - 4400    (Name of Contact Person)	106515W	) 88 1# ST. SU179 207	
For further information concerning this matter, please call:  ### Plank Not Final (Pat (305) 279-4400  (Name of Contact Person) (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  ### \$35 Filing Fee \$ \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)  ### ### AILING ADDRESS:  ** Amendment Section Division of Corporations P.O. Box 6327  ** Box 6327    Amendment Section Division of Corporations Clifton Building	•	•	
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Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building	MAILING ADDRESS:		
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Tallahacsee, Fl. 32314 2661 Evecutive Center Circle	· · · · · · · · · · · · · · · · · · ·		

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

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Pursuant to of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	SHOPPING WITH SANDY, INC.
SECOND:	· ·
THIRD:	The document number of the corporation (if known): PO5 000001124  The date dissolution was authorized: Df 14MBER 6, 2006
	Effective date of dissolution if applicable: DELEMBER 3), 2006 (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
	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: Candra L. Churla
	(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)
	SANDRA L. SHUSHAN
	(Typed or printed name of person signing)
	Persident (Title of person signing)
	( a. Langa. a.D

Filing Fee: \$35