## P05000002947

(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	İ
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Office Use Only



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Voldis Whote 3-6-09

## **COVER LETTER**

, TO: Amendment Section

SUBJECT: Actives of Dissolution  DOCUMENT NUMBER: POSOUDO2947  The enclosed Articles of Dissolution and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:
DOCUMENT NUMBER: POSOUDO 2947  The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michelle Waller (Name of Contact Person)
(Name of Contact Person)
N/A
(Firm/Company)
701 So Vobson Rd #615 (Address)
(Address)
Mesa, AZ 85202 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Michelle at (480) 773 8018  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
,
\$35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
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

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): P0500000 2947		
THIRD:	The date dissolution was authorized: Feb. 27, 2009		
	Effective date of dissolution if applicable: Feb 27, 2009  (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:  (By a director, pursident 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)		
	Michelle Waller (Typed or printed name of person signing)		
	V.P.		
(Title of person signing)			

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

against this corporation as provided in s. 607.1407, F.S. This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Promotions Inc. Name of Corporation: Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00