## P05000036105

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:				
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status				
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Certified Copies Certificates of Status	(Business Entity Name)			
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FILED

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SECRETARY OF STATE
ALL AHASSEF FLORE

W. J. J. O.

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	T: The name of the corporation as currently filed with the Florida Department of State:			
	Georine 2919, Inc			
SECOND:	The document number of the corporation (if known): 105000	36105		
THIRD:	The file date the articles of incorporation: $\frac{3}{1}$	O6 A SECF		
FOURTH:	(CHECK AT LEAST ONE BOX)	06 APR 27 SECRETAR) SECRETAR)		
	None of the corporation's shares have been issued.	1 1 1		
	The corporation has not commenced business.	AM 9: 36 OF STATE E. FLORID		
FIFTH:	No debt of the corporation remains unpaid.	<b>∀</b> ; • <b>0</b> ;		
SIXTH:	The net assets of the corporation remaining after winding up have been disto the shareholders, if shares were issued.	stributed		
SEVENTH:	Adoption of Dissolution (CHECK ONE)			
A majority of the incorporators authorized the dissolution.				
A majority of the directors authorized the dissolution.				
Sign	ature:  (By a director, president or other officer - if directors or officers have not been selected, by a in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)  [Typed or printed name of person signing)	n incorporator - if		
	President (Title of Person Signing)			

Filing Fee: \$35