P05000042216

(Re	equestor's Name)	
(Ac	idress)	
(Ad	ldress)	
. (Cit	ty/State/Zip/Phone	e #)
PICK-UP	TIAW [MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
ALLAHASSEE, FLORID

Whatices 01-23-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION ON CO	DRPORATION	
DOCUMENT NUMBER: P0500004	2216	
The enclosed Articles of Dissolution and for	ee are submitted for	filing.
Please return all correspondence concerning	g this matter to the fo	llowing:
JULIO NUNEZ		· .
(Name of	Contact Person)	
JUNUZ CORPORATION		
(Firm	n/Company)	
8576 BRIAR GROVE CR		
(A	ddress)	
TAMPA, FLORIDA 33615		
(City/Sta	te and Zip Code)	
For further information concerning this ma	ter, please call:	
JULIO NUNEZ		806-1162
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:	
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fed Certified Copy (Additional copy i enclosed)	Certificate of Status &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	7 I (TREET ADDRESS: Amendment Section Division of Corporations Clifton Building 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:
	JUNUZ CORPORATION
SECOND:	The document number of the corporation (if known): P05000042216
THIRD:	The date dissolution was authorized: December 31,2007
	Effective date of dissolution if applicable: December 31,2007 (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) AN 22 PM F: OF ST
	Signature: (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)
	JULIO NUNEZ
	(Typed or printed name of person signing)
	PRESIDENT/OWNER
	(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. JUNUZ CORPORATION 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: Any description of claim made. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) JUNUZ CORPORATION 8576 BRIAR GROVE CR TAMPA, FLORIDA 33615 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. **JULIO NUNEZ**

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

Signature of the Person Filing

Printed Name of the Person Filing