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(Red	questor's Name)	
(Add	dress)	·
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PICK-UP	WAIT	MAIL
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(Dad	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	
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DIVISION OF CORPORATION TALLAHASSEE, FLORIDA

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LAZARUS CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUMENT N	UMBER(S), (if known):
TECHAGUA PROOFI	
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
3	
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
Walk in Pick up time 3.00 Mail out Will wait P	Certified Copy Chotocopy Certificate of Status
NEW FILINGS AM	ENDMENTS
	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS RE	GISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
· ·	

Examiner's Initials

ARTICLES OF DISSOLUTION



Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: SECRETARY OF STATE F

FIRST:	The name of the corporation as currently filed with the Florida Department of State.		
	Techaqua Prooping Corp		
SECOND:	The document number of the corporation (if known): P0500041928		
THIRD:	The date dissolution was authorized: $1-30-07$		
	Effective date of dissolution if applicable: (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)		

(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)

(Typed or printed name of person signing)

Filing Fee: \$35