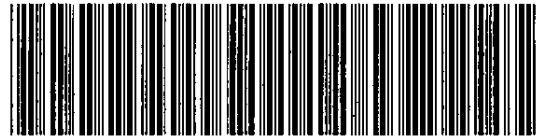


P05000069532



000158729630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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JUL 24 2009

EXAMINER

**Marta Fontova**

July 21, 2009

Florida Department of State

Division of Corporation

P. O. Box 6327

Tallahassee, Florida 32314

Gentlemen:

Enclosed is my check payable to the Department of State in the amount of \$35 covering the D9issolution of the corporation Marta G. Vieta Fontova, PA

Thank you for your attention to this matter.

Sincerely,



Marta Fontova

**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:

MARTA G. VIETA FONTOVA, PA

SECOND: The document number of the corporation (if known): P05000069532

THIRD: The date dissolution was authorized: 06/19/09

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)

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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)

MARTA FONTOVA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**Filing Fee: \$35**