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COVER LETTER

TO: Amendment Section Division of Corporations	
Division of Corporations	
SUBJECT: DISSOLUTION	
DOCUMENT NUMBER: POSOOODO	619
The enclosed Articles of Dissolution and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
SAMUEL W. BUTLEL	
(Name of Contact P	erson)
SAMUEL W. BUTLER (Name of Contact P Chelle BAGS INC (Firm/Compar	
(=	· · · · · · · · · · · · · · · · · · ·
3602 Lower Park Rcs (Address)	
(Address)	1111
Orlando FC 32	814-6383
(City/State and Zip	Code)
For further information concerning this matter, please	e call:
Sam Borzec at ((Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certificate	5 Filing Fee & \$\Bigsquare{1}\\$52.50 Filing Fee, ed Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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	nt of St	ate:	
	Chek Bags, INC.			
SECOND:	The document number of the corporation (if known): PO50007	26/	9	
THIRD:	The file date of the articles of incorporation: May 13 2005			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	None of the corporation's shares have been issued.			
	The corporation has not commenced business.			
FIFTH:	No debt of the corporation remains unpaid.			
SIXTH:	The net assets of the corporation remaining after winding up have been disto the shareholders, if shares were issued.	tribute		** <u>*</u>
SEVENTH:	Adoption of Dissolution (CHECK ONE)		APR 2:5	
	A majority of the incorporators authorized the dissolution.		T0	
	A majority of the directors authorized the dissolution.		3: 03	
Sign	nature: (By a director, president or other officer - if directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	n incorpo	rator -	iſ
	Sanvel W. Bullen (Typed or printed name of person signing)			
	Resident (Title of Person Signing)			

Filing Fee: \$35