P05000011924

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: CORPORATION DISSOLUTION				
DOCUMENT NUMBER: P05000071924	· 			
The enclosed Articles of Dissolution and fee are	submitted for filing.			
Please return all correspondence concerning this r	natter to the following:			
MARIA J. ROCHA				
(Name of Contact Person)				
AXA FINANCIAL CORPORATION				
(Firm/Com	pany)			
2020 NE 163rd Street, Suite 103	1 10			
(Address)				
N. MIAMI BEACH, FL 33162				
(City/State and	Zip Code)			
For further information concerning this matter, ple	ease call:			
MARIA J. ROCHAa	t (786) 295-0849			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
(Add	.75 Filing Fee & \$\subseteq\$\$\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\			
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 of State:		
	AXA FINANCIAL CORPORATION		
SECOND:	The document number of the corporation (if known): P05000071924		
THIRD:	The file date of the articles of incorporation: 05/17/2005		
FOURTH:	(CHECK AT LEAST ONE BOX)		
	None of the corporation's shares have been issued.		
	The corporation has not commenced business.	02	
FIFTH:	No debt of the corporation remains unpaid.	OE NA	
SIXTH:	The most about of the observation of the many of the control of th		
SEVENTH:	Adoption of Dissolution (CHECK ONE)	<u>ر</u> ج	
	A majority of the incorporators authorized the dissolution.	-	
	A majority of the directors authorized the dissolution.		
Sign	ature: DOUTON.		
	(By a director, president or other officer - if directors or officers have not been selected, by an incorporate in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	r - if	
	MARIA J. ROCHA		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of Person Signing)		

Filing Fee: \$35