P05000011927

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer	
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SECRETARY OF STATE FALLAHASSEE. FLORIDA

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Dissolution with Notice

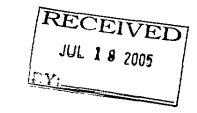
Office Use Only

T BROWN JUL 2 1 2005

COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, Florida 32314



SUBJECT: DISOLUTION OF CO	RPORATION	N
DOCUMENT NUMBER: P05000071	927	
The enclosed Articles of Dissolution and fee	are submitted for fil	ling.
Please return all correspondence concerning th	is matter to the foll	owing:
DONNA BYRNE		
(Name o	of Person)	
COWAN & PACETTI INC	・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・	
(Name of Fir	m/Company)	
136 MALAGA STREET		
(Addr	ess)	
ST AUGUSTINE, FLORID	A 32084	
	and Zip Code)	
For further information concerning this matter	, please call:	
DONNA BYRNE		824-8147
(Name of Person)	(Area Code	& Daytime Telephone Number)
Enclosed is a check for the following amount:		
	\$43.75 Filing Fee & Certified Copy Additional copy is enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	An Div	REET ADDRESS: nendment Section vision of Corporations D.E. Gaines Street

Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Plorida 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: NMCK INCORPORATED The document number of the corporation (if known): P05000071927 SECOND: The file date the articles of incorporation: MAY 17,2005 THIRD: (CHECK AT LEAST ONE BOX) FOURTH: 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 distributed to the shareholders, if shares were issued. Adoption of Dissolution (CHECK ONE) SEVENTH: A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signature: other officer off directors or officers have not been selected, by an imporporator - if in the hunds of a receiver, troston, or other court appointed fiductary, by that fiduciary.) NGHIA LUONG

Fling Pee: \$35

(2 itle of person algebia)

(Typed or printed name of person signing)

PRESIDENT

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 filling a voluntary dissolution. Name of Corporation: NMCK INCORPORATED 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 Informs tion that must be included in a claim: Mailing address where claims can be sent; (Claims carnot be sent to the Division of Corporations) NMCK INCORPORATED 3602 SOUTH PENINSULA #103 PORT ORANGE, FLORIDA 32127 A claim against the at ove named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. NGHIA LUONG Printed Name of the Person Filling

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