## PD50008/137

(Req	uestor's Name)	
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(City/	State/Zip/Phon	e #)
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SECRETARY OF STATE
SHARSSEF, FLORIT

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## **COVER LETTER**

TO: Amendment Section

Tallahassee, Florida 32314

Division of Corporations
SUBJECT: Dissolution of ARTICLES OF Incorporation
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Abigail S. TELENZAK (Name of Person)
Sheur Inc.
(Name of Firm/Company)
450 OCEAN FOREST DRIVE (Address)
ST. AUGUSTINE FL 32080 (City/State/and Zip Code)
For further information concerning this matter, please call:
Abby TE 2n2A (204) 461-4386 (Name of Person) at (904) 461-4386 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed)  Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327  STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

## ARTICLES OF DISSOLUTION

articles of dissolut	tion:
FIRST: The	name of the corporation as currently filed with the Florida Department of State:
SECOND: The	document number of the corporation (if known): <u>PO 50000 8113</u> 7
THIRD: The	file date the articles of incorporation: 6/28/2005
FOURTH: (CH	HECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH: No d	lebt of the corporation remains unpaid.
	net assets of the corporation remaining after winding up have been distributed shareholders, if shares were issued.
SEVENTH: A	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Signed t	this 12 <sup>th</sup> day of July , 2005.
Signature:_ (I i	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.)
	Abi Ani TELENZA (Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35