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COVER LETTER

TO: Amendment Section	
Division of Corporations	Lrish tir
DOCUMENT NUMBER: 05000081609	
DOCUMENT NUMBER: 105000081609	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Colleen M. Robertson	
(Name of Contact Person)	
Irish Finds, Enc.	
(Firm/Company)	
9441 Lewis Drive	
(Address) Vev Ay TW. 47043 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Collegen Robertson at (812) 427- (Name of Contact Person) (Area Code & Daytime Te	3537 Elephone Number)
Enclosed is a check for the following amount:	
(Additional copy is Certified	e of Status & Copy al copy is
MAILING ADDRESS:STREET ADDRESSAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Corporations	on orations

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 Sta	ite:
SECOND:	The document number of the corporation (if known): POS 0000 214 The file date of the articles of incorporation: 06-06-2005	₀ 09
THIRD:	The file date of the articles of incorporation:	
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.	6.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	ľ
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an incorpora in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	ator - if
	(Typed or printed name of person signing) (Typed or printed name of person signing) (Title of Person Signing)	

Filing Fee: \$35