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an

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISSIDIUTION of (DP.
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee are submitted for fil	ing.
Please return all correspondence concerning this matter to the following	owing:
SamanthaKasprzyk	
Mantha Margaret Kas (Firm/Company)	przyk A EIN 20-
716283 DE (Firm/Company)	30904
Badenton R 34701	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Mars of Contact Person) at (941) (Name of Contact Person) (Area Code	650 3732 & Daytime Telephone Number)
Enclosed is a check for the following amount:	
☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐ Certified Copy (Additional copy is enclosed)	& [\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Amendment Section An Division of Corporations Div P.O. Box 6327 Cli	REET ADDRESS: nendment Section vision of Corporations ifton Building 61 Executive Center Circle

Tallahassee, FL 32301

•	ARTICLES OF DISSOLUTION
Pursuant to of dissoluti	section 607.1403, Florida Statutes, this Florida profit corporation submits the lost on:
FIRST:	The name of the corporation as currently filed with the Florida Department of State ORIDA Land Haman Margaret Kaspruk, P.A.
SECOND:	The document number of the corporation (if known): PoSOOO 089151
THIRD:	The date dissolution was authorized: Dec 31 7006
	Effective date of dissolution if applicable: MUCH 3 2000 (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group)
	Signature: (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)
	Samantha Kasprzyk
	(Typed or printed name of person signing)
	(Title of person signing)

Filing Fee: \$35