## P05000092719

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Voldis Tlewis



04/28/06--01015--006 \*\*43.75

## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
SUBJECT: HOMETOWN CONNECTIONS	INC	
DOCUMENT NUMBER: P05000092719		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to	the following:	
JEAN EXUM		
(Name of Contact Person)		
HOMETOWN CONNECTIONS INC		
(Firm/Company)		
132 BRIGHTON CIRCLE		
(Address)		
AUBURNDALE, FL 33823		
(City/State and Zip Coo	le)	
For further information concerning this matter, please call:		
JEAN EXUM at ( 86	3 ) 967-8283	
(Name of Contact Person) (Ar	ea Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
San Filing Fee (2)\$43.75 Filing Fee & (2)\$43.		
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 607.1403, 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 States
	HOMETOWN CONNECTIONS, INC.	37
SECOND:	The document number of the corporation (if known): P05000092719	128
THIRD:	The date dissolution was authorized: 12-31-05	7) U. W
	Effective date of dissolution if applicable: 12-31-05	
	(no more than 90 days after dissolution	on file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	st for dissolution
	Dissolution was approved by of the shareholders through voting groups	•
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled
	The number of votes cast for dissolution was sufficient for approval by	
	(voting group)	
	Signature: Jean Eyeur	
	(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)	,
	JEAN EXUM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

Filing Fee: \$35

## 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 filing a voluntary dissolution.
Name of Corporation: HOMETOWN CONNECTIONS, INC.
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 information that must be included in a claim:
DATE OF SERVICE, NAME OF ISSUER,
DETAIL OF SERVICE PERFORMED,
CONTACT NAME AND NUMBER FOR QUESTIONS
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
HOMETOWN CONNECTIONS INC
132 BRIGHTON CIRCLE
AUBURNDALE, FL 33823
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
JEAN EXUM  Printed Name of the Person Filing  Signature of the Person Filing

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