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(Re	questor's Name)	
(Ad	dress)	
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(Au	aress)	
(Cit	:y/State/Zip/Phone	e #)
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(Do	cument Number)	
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TO: Amendment Section Division of Corporations	· '
SUBJECT: Detter E	Kpress Inc
DOCUMENT NUMBER: POSO	00113593
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
Heidy Ro (Name of Co.	ntact Person)
Onion Carri	company)
5082 NW	Ty Lup
(Addr	,
please +1	33169 and Zip Code)
(City/State a	and Zip Code)
For further information concerning this matter	, please call:
Heeder Robingu (Name of Contact Person)	Lyat (30t) 3921035 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status	\$43.75 Filing Fee & S52.50 Filing Fee, Certified Copy Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

SECRETARY OF STATE DIVISION OF CORPORATIONS

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 State Decle Expuess 5-6	te:				
SECOND:	The document number of the corporation (if known): P 0500011	<u>35</u> 0	<u>1</u> 3			
THIRD:	The date dissolution was authorized:					
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file days	ntc)	<u>:</u>			
FOURTH:	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes cast for d was sufficient for approval.	issolut	ion			
	Dissolution was approved by the shareholders through voting groups.					
	The following statement must be separately provided for each voting group entitle to vote separately on the plan to dissolve:	d	4			
	The number of votes cast for dissolution was sufficient for approval by					
	(voting group)					
	Signature. X SUDSK Butalleluz.	*	SIAIG			
	(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)	OI ACH Y	ON OF S			
	Cesar Batelleluz (Typed or printed name of person signing)	AH IO:	Y OF STA			
	President	53	TIONS			

Filing Fee: \$35

(Title of person signing)