P05000/3/200

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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O7 JAN 16 PM 3: 52

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Home Game Inc.	
DOCUMENT NUMBER: P05000131200	
The enclosed Articles of Dissolution and fee are submitted	ted for filing.
Please return all correspondence concerning this matter to	o the following:
Anthony Sanchez	
(Name of Contact Perso	on)
Home Game Inc.	
(Firm/Company)	
3771 Kenyon Rd.	
(Address)	
Lake Worth, FL 33461	
(City/State and Zip Co	de)
For further information concerning this matter, please cal	11:
	61) 641-0547
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\times\$\$43.75 Filing Fee \$\times\$\$ \$43.75 Filing Fee \$\times\$\$ Certified C (Additional enclosed)	Copy Certificate of Status &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION OF JAN 16 PM 3: 52

Pursuant to of dissolut	o section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles ion:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Home Game Inc.
SECOND:	The document number of the corporation (if known): P05000131200
ГНIRD:	The date dissolution was authorized: 12/15/2006
	Effective date of dissolution if applicable: 12/31/2006 (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 - Lin the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Anthony Sanchez
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

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: Home Game Inc.

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

Name of Corporation.
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:
Claimant Name
Claimant Address
Amount of claim
Date of claim
Reason for claim
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Home Game Inc.
3771 Kenyon Rd.
Lake Worth, FL 33461

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.

Anthony Sanchez

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