Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H110000170293)))



H110000170293ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : FLORIDA FILING & SEARCH SERVICES

Account Number : I20000000189 Phone : (850)216-0457

Fax Number

: (850)216-0460

RECEIVED 1 JAN 20 AM 8: 02 REGRASSE A STATE

1

DISSOLUTION OR WITHDRAWAL WOLFE MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

11 JAN 20 AM ID: 13

Electronic Filing Menu

Corporate Filing Menu

Help

01-21-11

1/2:0/2011

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 State:		
	Wolfe Management, Inc.	l e	
SECOND:	The document number of the corporation (if known); P05000138222		
THIRD:	The date dissolution was authorized: January 3, 2010		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution is	ile date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast f was sufficient for approval.	or dissolution	
	Dissolution was approved by of the shareholders through voting groups.	į	
	The following statement must be separately provided for each voting group en to vote separately on the plan to dissolve:	titled	
	The number of votes cast for dissolution was sufficient for approval by		
	·	Žie _	
	(voting group)		
		JAN 20 Rejari	
	To la la la		
S	(By a director, president or other officers - if directors or officers have not been selected, by	. 26 5	
	an incorporator - if induc hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	AM IO: 47	
1	Robert C. Wolfe	146	
_	(Typed or printed name of person signing)		
F	President		
-	(Title of person signing)		

Filing Fee: \$35