

PD5000168381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

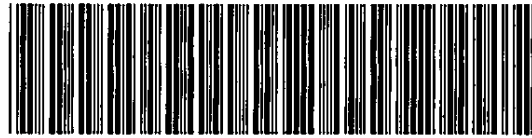
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000106547390

07/26/07--01032--005 **25.00

09/19/07--01003--016 **10.00

FILED
07 SEP 17 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Diss.
SR



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 2, 2007

Amavi Klutse
Afrikom/Treasure of Africa
2021 W Atlantic Blvd #104
Pompano Beach, FL 33069

SUBJECT: AFRIKOM, INC
Ref. Number: P05000168381

We have received your document for AFRIKOM, INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 407A00047783

RECEIVED
2007 SEP 17 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION

DOCUMENT NUMBER: _____

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

AMANVI KLUTSE
(Name of Contact Person)

(Firm/Company)

2021 W ATLANTIC BLVD # 104
(Address)

Pompano Bch FL 33069
(City/State and Zip Code)

For further information concerning this matter, please call:

AMANVI KLUTSE at (954) 557 1137
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: **\$10.00**

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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 607.1401, 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:

AFRIKOM, INC

SECOND: The document number of the corporation (if known): _____

THIRD: The file date of the articles of incorporation: 01/05

FOURTH: (CHECK AT LEAST ONE BOX)

- None of the corporation's shares have been issued.
- The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

- A majority of the incorporators authorized the dissolution.
- A majority of the directors authorized the dissolution.

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.)

AMANVI KLUTSE

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

FILED
SEP 17 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$35