## Polio0000525

(F	Requestor's Name)	·	
( <i>f</i>	Address)		
	Address)		
(C	City/State/Zip/Phone	· #)	
PICK-UP	WAIT	MAIL	
(E	Business Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

12/2/09

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: Dissolution of the ABBA Empire, Inc.			
DOCUMENT NUMBER: P0600000525			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Stephen Tvy (Name of Contact Person)			
ABBA Realty Services, Inc. (Firm/Company)			
(Address)			
Po Box 5153  (Address)  Winter Park, FL 32793  (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Stephen Try  at (352) 256-3610  (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$\textstyle \textstyle			
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			

## ARTICLES OF DISSOLUTION

FILED

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Pursuant to s of dissolutio	section 607.1403, Florida Statutes, this Florida profit corporation submits the following article on:  SECRETARY OF STATE  TALLAHASSEE, FLORIDA
FIRST:	The name of the corporation as currently filed with the Florida Department of State:  The ABBA Empire, Inc.
SECOND:	The document number of the corporation (if known): Po6000000 525
THIRD:	The date dissolution was authorized: <u>January 1, 2009</u>
	Effective date of dissolution if applicable: January 1, 2009  (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)
c	
	(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)
	Steplen Ivy (Typed or printed name of person signing)
	(Typed or printed name of person signing)
-	Vice 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: The ABBA Empire, Inc.	
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .	
Description of information that must be included in a claim:	•
Name of Company, Purpose of Claim, Date of Where Claim was filed, why Claim was filed How Claim was filed, Amount of Claim	Claim,
Where claim was filed, why claim was filed	d
How claim was filed, Amount or Claim	,
<i>b b b b b b b b b b</i>	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
Stephen Ivy	
PO BOX 5153	
Winter Park, FL 32793	
·	

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.

Printed Name of the Person Filing

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