(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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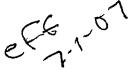
COVER LETTER

TO: Amendment Section

Division of Corporations			
SUBJECT: DISSOLUTION			
DOCUMENT NUMBER: P06000004134			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
MICHAEL BORDACK			
(Name of C	Contact Person)		
(Firm	n/Company)		
1901 S OCEAN BLVD #506			
(Ac	ddress)		
BOCA RATON, FL 33432			
(City/Stat	te and Zip Code)		
For further information concerning this mat	ter, please call:		
MICHAEL BORDACK	at (561 _) 447 6586		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amoun	nt:		
\$35 Filing Fee \$\square\$\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 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 607.1403, 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:		
	WINDOW-TEMP INC.		
SECOND:	The document number of the corporation (if known): P0600004134		
THIRD:	The date dissolution was authorized: 06/01/2007		
	Effective date of dissolution if applicable: 07/01/200 7 (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) OF STATE ORUN,		
	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)		
	MICHAEL BORDACK		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35