PO6000004439

(Re	questor's Name)			
(Ad	dress)			
	dress)			
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(City/State/Zip/Phone #)				
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PICK-UP	WAIT	MAIL		
(D.,	siness Entity Nam	20)		
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(Do	cument Number)			
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SECRETARY OF STATE
AND ANASSEE FLORIG

عربات C.COULLIETTE

APR 1 0 2309

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations				
SUBJECT: AZAT SHAYNUROV INC				
DOCUMENT NUMBER: P0600004439				
The enclosed Articles of Dissolution and fee are s	ubmitted for filing.			
Please return all correspondence concerning this m	natter to the following:			
Azat Shaynurov				
(Name of Contact	t Person)			
AZAT SHAYNUROV INC				
(Firm/Company)				
3301 Maitland dr.				
(Address)				
Holiday, FL, 34691				
(City/State and 2	Zip Code)			
For further information concerning this matter, ple	ase call:			
	388-9718			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
(Add	.75 Filing Fee & \$\sum \$\\$\$52.50 Filing Fee, ified Copy			
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 Departmen	ıt of Sta	te:	
	AZAT SHAYNUROV INC			
SECOND:	The document number of the corporation (if known): P060000443	9		
THIRD:	The file date of the articles of incorporation: 01/13/2006			
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 dis to the shareholders, if shares were issued.	tributed	09	
SEVENTH:	: Adoption of Dissolution (CHECK ONE)	CRET	APR	· · · .
	A majority of the incorporators authorized the dissolution.	HASSEE, FU	9-	Course Course Course Course
	A majority of the directors authorized the dissolution.	OF STATE OF LORIDA	PM 2: 18	THE STATE OF THE S
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	incorpore	utor - if	
	•			
	Azat Shaynurov (Typed or printed name of person signing)			
	president			
	(Title of Person Signing)			

Filing Fee: \$35