P06000005584

(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



600086698676

01/31/07--01024--022 **35.00

SECRETARY OF STATE
ALLAHASSEE, FI ORIO

XHM YOLIDIS

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: ARTICLES OF DIS	SOLUTION
DOCUMENT NUMBER: PO60000	05584
The enclosed Articles of Dissolution and fee are sub	mitted for filing.
Please return all correspondence concerning this mat	ter to the following:
GIOVANNA MITCH (Name of Contact P	tELL erson)
(Firm/Compar	
85/3 CASS Rd. (Address)	
ZEPHYRHILLS, FLOR (City/State and Zip	10A 33540 Code)
For further information concerning this matter, please	e call:
GIOVANNA MITCHELL at ((Name of Contact Person)	813) 715 - 0600 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
	ed Copy Certificate of Status & Certified 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 Department of State:	
	GLM SOAP INC.	
SECOND:	The document number of the corporation (if known): POGOOOO55584	
THIRD:	The file date of the articles of incorporation: 01-05-06	
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)	
	Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution.	
\square A majority of the directors authorized the dissolution.		
	EFFLORIE L	
Signature: Signature: Signature Sig		
	GIOVANNA L MITCHELL PRES (Typed or printed name of person signing)	
	PRESIDIENT (Title of Person Signing)	

Filing Fee: \$35