## Po600017668

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Phorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
l N I
Special Instructions to Filing Officer:
Cooc and wall was
Cooc and will the
Cooc and will the
Special Instructions to Filing Officer:  Per Corrections  and the corrections
Cooc as say the
Cooc as say the

Office Use Only



300149076193

dess with

04/24/09--01021--014 \*\*35.00

FILED 2009 APR 24 AM 9: 57
TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: INTERNATIONAL	CORDBIGODSTANCELL REGISTRY,
DOCUMENT NUMBER: PO 600	0017668
The enclosed Articles of Dissolution and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
DANIEL RICHA	is yo
(Name of C	Contact Person)
INTERNATIONAL COR	D BLOODSTEMLER REGISTRY INC
•	/Company)
3547 N.W. CL	UBSIDE CIRCLE
(Ad	dress)
BOLA RATON, FR	37496
(City/State	e and Zip Code)
For further information concerning this matter	er, please call:
DUNIEL RICHAID	_at (561) 271-9410 (c∈4)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	t
\$35 Filing Fee \$\bigcip \\$43.75 Filing Fee & Certificate of Status	343.75 Filing Fee & S2.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy enclosed) 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

1

ARTICLES OF DISSOLUTION

2009 APR 24

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the Flowing AH 9:57 FIRST: The name of the corporation as currently filed with the Florida Department of State: INTERNATIONAL GOLD BLOOD STEM CELL REGISTRY, INC. The document number of the corporation (if known): PO 6 000017 668 SECOND: The file date of the articles of incorporation: 02 - 03 - 06THIRD: 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. Saniel Richard OCIGNAL MGRATUE 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.) (Typed or printed name of person signing) FOUNDER PRESIDENT LEO.

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 an	id is not n	equired when	filing a volum	tary diss	solution.	
1.2		. 1.77 <b>~ 7</b>		/	1	<i>i</i> "

Name of Corporation: /NTERNATIONAL CORD. BLOOD STEM (EL KEG-15TAT, (NO.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
THERE NO CLAIMS AGAINST CORPORATION
NOBUSINESS WAS EVER DONE
NO SHAKES ISSUED
I AM TO YAS OF LOS / HAD SENIOUS HEALTH

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

OPERATE THIS HUSINOS

KSUES THUT STARGED THAT HAKE IT DIEFICULT

THERE ARE NO CLUICES
MY ADDRESS 15
3547 N.W. CLUBSIDE CIRCLE
BOLA RATON FLA 33496

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.

DAVIER O. RICHARD

Printed Name of the Person Filing

Signature of the Person Filing

\_ \_

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