P06000019985

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Sossillation in the state of t
0.07.10.3
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
_

Office Use Only



200120483422

03/17/08--01047--007 **43.75

OB MAR 17 PM 4:07
SECRETARY OF STATE
SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION of Monation, DESANS IN APUAL LIV
DOCUMENT NUMBER: 7060019985
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
RAYMOND LEFEBURE (Name of Contact Person)
DESIGNS IN CASUAL LIVING INC. (Firm/Company)
021 SE 157 -
(Address) Pamland Beach, 7L, 33060 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
RAYMOND LEFESVAC at (954) 651-3789 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & \bigcup \\$52.50 Filing Fee, Certificate of Status \$\bigcup Certified Copy & Certificate of Status & Certified Copy & C
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:
	DESIGNE IN CAPUAL LIVING, INC.
SECOND:	The document number of the corporation (if known): Pob 0000/9585
THIRD:	The date dissolution was authorized: 3/11/08
	Effective date of dissolution if applicable: A+ ONCE (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
	RAYMOND LEFEBURE
	RAYMOND LEFEBURE ONLY SHARL HULDEN & ONLY SHARL HULDEN & ONLY SHARL HULDEN
	HAS.
that fiduciary)	SEFO SEFO
	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
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President

Filing Fee: \$35

(Title of person signing)