(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: steven ende inc.	
D0600003334	
DOCUMENT NUMBER: P06000033213	3
The enclosed Articles of Dissolution and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
steven ende	
(Name of Conta	act Person)
steven ende inc	*
(Firm/Cor	npany)
7115 moravian dr., port richey, fl. 34	
(Addres	s)
	•
(City/State and	I Zip Code)
For further information concerning this matter, p	lease call:
steven ende	_{at (} 727 ₎ 321-9671 ·
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Ce (Ac	3.75 Filing Fee & S52.50 Filing Fee, rtified Copy Iditional copy is aclosed) 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 607.1401, 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:			
	steven ende inc			
SECOND:	The document number of the corporation (if known): P06000033213			
THIRD:	The file date of the articles of incorporation: (CHECK AT LEAST ONE BOX) The file date of the articles of incorporation: (CHECK AT LEAST ONE BOX)			
FOURTH:	(CHECK AT LEAST ONE BOX) EFF: 3/6/2006			
	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 incorporators authorized the dissolution. A majority of the directors authorized the dissolution.	STATE OF STA		
Sign	Hature: (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.)	OF SHIPTONS		
·	TYPEN Ende (Typed or printed name of person signing)			
	President (Title of Person Signing)			

Filing Fee: \$35