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TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: Articles of Dissolution for Cosmic Coffee DOCUMENT NUMBER: P06000034269 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jason Reed (Name of Contact Person) Cosmic Cafe (Firm/Company) 4247 Parkway Drive (Address) Melbourne, FL 32934 (City/State and Zip Code) For further information concerning this matter, please call: Jason Reed (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 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:		
	Cosmic Coffee, INC		
SECOND:	The document number of the corporation (if known): P06000034269		
THIRD:	The file date of the articles of incorporation: 3/8/2006		
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 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.		
Signa	(By a directory 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.)		
	Jason Reed (Typed or printed name of person signing)		
	PVST (Title of Person Signing)		

Filing Fee: \$35