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(Re	equestor's Name)	
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
SUBJECT: CORPORATE DISSOLUTION		
DOCUMENT NUMBER: P0 6000 / 06352		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
KERRY M. NEALON. (Name of Contact Person)		
SRKN, INC. (Firm/Company)		
(Firm/Company)		
360 E. MCNAB ROAD (Address)		
POMPAJ REACIL EL 32 n/o 0-0		
POMPANO BEACH, FL 33060-9320 (City/State and Zip Code)		
For further information concerning this matter, please call:		
KERRY M. NEALON at (954) 949-5303 (Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
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MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:
	SRKN, INC.
SECOND:	The document number of the corporation (if known): P06000/06352— The file date of the articles of incorporation: 9/15/06
THIRD:	The file date of the articles of incorporation: $9/15/06$
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)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature:  (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)
	Presi Levi (Title of Person Signing)

Filing Fee: \$35