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SECRETARY OF STATE
ALL AHASSEF, FLORIDA

ALL AHASSEF

COVER LETTER

Division of Corporations	
SUBJECT: DISOLUTION OF CORP	
DOCUMENT NUMBER: POLOOOI55287	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Welle Tharmo (Name of Contact Person)	
(Firm/Company)	
7803 & Colonial Dave #103	
Orlando P. 3280+ (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (321) 209 3095 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\begin{array}{c} \\$43.75 Filing Fee & \Boxed{Baseling Fee} \\$52.50 Filing Fee, \\ Certificate of Status & \\ (Additional copy is enclosed) \\ \end{array}\$ (Additional copy is enclosed)	
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 607.1403, 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:
	All ABOUT TOUS TIC
SECOND:	The document number of the corporation (if known): 0.00155080
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: (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 at its to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group)
	Signature: (By a director, president of 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)
	WelleTherino
	(Typed or printed name of person signing)
	(Title of person signing)

Filing Fee: \$35