## P06000157383

(Requestor's Name)
(Address)
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(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity, Name)
(Document Number)
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SECRETARY OF STATE
AND AN AN SEE. PLOSIDA

C.COULLIETTE

**EXAMINER** 

## COVER LETTER . . .

TO: Amendment Section Division of Corporations		
SUBJECT: Articles of	Dresolution	
DOCUMENT NUMBER: POLOCON	157383	
The enclosed Articles of Dissolution and fee are subr	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
ARNOLD J. Chew		
(Name of Contact Pe	erson)	
Wallpaper usoeus Commer (Firm/Company	ecial Dylasions Zx	
19621 Six mile Cipross (Address)	Pkwy	
City/State and Zip	113	
(City/State and Zip	Code)	
For further information concerning this matter, please	call:	
(Name of Contact Person) at (3	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Certifie	onal copy is Certified Copy	
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:		
	Wallpaper Woord Commercial Zasteres Inc		
SECOND:	The document number of the corporation (if known): \$\Po600157383\$		
THIRD:	The date dissolution was authorized: 12.31-09		
	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 entitled to vote separately on the plan to dissolve:		
	The number of votes cast for dissolution was sufficient for approval by		
	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 that fiduciary)		
	(Typed or printed name of person signing)		
	Pros.		
	(Title of person signing)		

Filing Fee: \$35