## P0700004/06

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(Address)			
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**TO:** Amendment Section

Tallahassee, FL 32314

ATX1

## **COVER LETTER**

Division of Corporations				
SUBJECT: WARZONE 4 X 4'8 AND MORE, INC.				
DOCUMENT NUMBER: P07000004106				
The enclosed Articles of Dissolution and fee	are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
MILDRED N. FOSTER				
(Name of Contact Person)				
WARZONE 4 X 4'S AND MORE INC				
(Firm/Company)				
11968 BETULA RD				
·, (Address)				
:				
JACKSONVILLE, FL 32246 (City/State and Zip	Code)			
For further information concerning this matter,	please call:			
//// =	04 962-1436			
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
Certificate of Status (	\$43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)			
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building			

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ATX1

## **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 Depar	tment of St	ate:
	WARZONE 4 X 4'S AND MORE INC			
SECOND:	The document number of the corporation (if k	nown <u>P07000004108</u>		_
THIRD:	The date dissolution was authorized	9/1/2007	3/1/2007	_
	Effective date of dissolution if applicable:	9/18/2007 o more than 90 days after dissolu	tion [la data)	_
OURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the sharehold dissolution was sufficient for approval.	lders. The number of v	otes cast fo	r
	Dissolution was approved by the sharehol	ders through voting gro	SE Seque	07
	The following statement must be separately parentitied to vote separately on the plan to disso		group A	SEP 21
	The number of votes cast for dissolution was	sufficient for approval b	ORIA:	≥ ( =
	(voting group)		<u>&gt;'''</u>	n n
S	Signature: Milded N Fas	Ler		
	(By a director, president or other officer - if directors of an incorporator - if in the hands of a receiver, trustee, that fiduciary)			
<u>.</u>	MILDRED N. FOSTER (Typed or printed name of person)	elgning)	<u> </u>	
<u>_</u>	PRESIDENT			
_	(Title of person signing)			

Filing Fee: \$35