P0700035199

(Re	equestor's Name)	
(Ad	ldress)	,,
. (Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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Validation of the state of the

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISSOLUTION	
DOCUMENT NUMBER:	7000035199
The enclosed Articles of Dissolution and for	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Magdalena	Kornblum
DMK Chanir	Konblum Contact Person) 19 Svcs Inc
2811 Sweet	Spin arde
_ Kissimmee	te and Zip Code)
(City/Sta	te and Zip Code)
For further information concerning this mat	tter, please call:
Mandalena Kornbluginame of Contact Person)	1m at (407) 592- 2009 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS: Amendment Section
Amendment Section Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	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: Dm K Claning Servicas Fnc
SECOND:	The document number of the corporation (if known): P010000 35199
ΓHIRD:	The date dissolution was authorized: $824/01$
	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
	(voting group)
`	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)
	Mandalena Komblum (Typed or printed name of person signing)
	(Typed or printed name of person signing) (Titled person signing)
	(Title of person signing)

Filing Fee: \$35