## PD7000045990

(Requestor's Name)			
(Address)			
(Address)			
,			
(City/State/Zip/Phone #)			
(City/State/Zip/Priorie #)			
PICK-UP WAIT MAIL			
. (Business Entity Name)			
, , ,			
(Document Number)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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## **COVER LETTER**

.TO: Amendment Section

Division of Corporations				
SUBJECT: Dissolution of On Call Massage Corporation				
DOCUMENT NUMBER: P0700004599C				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Vicki Wilkes, President				
(Name of Contact Person)				
On Call Massage Corporation				
(Firm/Company)				
2150 Tamiami Trail #153				
(Address)				
Port Charlotte, FL 33948				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Vicki Wilkes, President at ( 941 ) 456-9625  (Name of Contact Person) (Area Code & Daytime Telephone Number)				
(Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
▼\$35 Filing Fee  \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee.  Certificate of Status Certified Copy (Additional copy is enclosed) (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:			
	On Call Massage Corporation	_		
SECOND:	The document number of the corporation (if known): P07000045990			
THIRD:	The date dissolution was authorized: December 31, 2008		<del></del>	
	Effective date of dissolution if applicable: December 31, 2008  (no more than 90 days after dissolution)	ion file date)		
FOURTH	Adoption of Dissolution (CHECK ONE)			
	✓ Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	PER		
	Dissolution was approved by the shareholders through voting groups.	N-5 HASSE	, <u>;;</u>	
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	Entitle &	ED	
	The number of votes cast for dissolution was sufficient for approval by	EDA ZI		
	(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)	y		
	Vicki Wilkes			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			

Filing Fee: \$35