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(Document Number)
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: DISSOlution		
DOCUMENT NUMBER:		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Euselda P Black (Name of Contact Person)		
Business office Support Solutions Inc. (Firm/Company)		
2610 E 38Th Are		
(Address)		
Tampa, 71 33610		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (407) 927 5818 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\$\times\$\$\$\$\times\$		
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 607.1401, 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:
	Business office Support solutions Inc
SECOND:	The document number of the corporation (if known):
THIRD:	The file date of the articles of incorporation:
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	\square A majority of the directors authorized the dissolution.
	THE REPORT OF THE PERSON OF TH
Sign	ature: Pushlack PDIack
-	(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.)
	EUSELDA PBJACK (Typed or printed name of person signing)
	awelder Person Signing)

Filing Fee: \$35