P07000059630

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Reque	estor's Name)	
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Certified Copies Certificates of Status	(Busine	ess Entity Name)	
	(Docum	nent Number)	
Special Instructions to Filing Officer:	Certified Copies	Certificates of Status	
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02/18/08--01008--011 **10.00

01/25/08--01018--022 **25.00

SECULE LARY OF STA

D:55/ notice



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 28, 2008

Joseph Morganelli Cuddle Keepers Inc. 399 Balboa Blvd. Clermont, FL 34715-8185

SUBJECT: CUDDLE KEEPERS INC.

Ref. Number: P07000059630

We have received your document for CUDDLE KEEPERS INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6901.

Susan Payne Senior Section Administrator

Letter Number: 508A00005776

SECRETARY OF STATE
TALL AHASSEE. FLORIDA

2008 FEB 15 AM 8: 00

RECEIVED

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissolve Coddle keepers Inc
DOCUMENT NUMBER: PO 7000059630
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joseph Morgane // (Name of Contact Person)
Coldle keepers Inc
399 Balboa Blud
Clernont F1 34715
(City/State and Zip Code)
For further information concerning this matter, please call:
Toseph Morganelli at (407) 353-7853 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) Certified Copy (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 607.1401, 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: Cuddle keepers Inc.
SECOND:	The document number of the corporation (if known): $\rho_{0700059630}$
THIRD:	The file date of the articles of incorporation: $\frac{5}{17/2007}$
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.
	A majority of the directors authorized the dissolution.
Sign	ature: McCollection of the officer - if directors of 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)
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation: Cuddle teepers Inc
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Company never officially got off the grand
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
399 Balboa Blud Clermont F1 34715
Clermont f1 34715
·
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Michelle Morganelli Printed Name of the Person Filing Michelle Museulle Museulle Signature of the Person Filing