P07000077525

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(Cit	y/State/Zip/Phone #)			
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☐ PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Name)	 			
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(Do	cument Number)				
Certified Copies Certificates of Status					
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Special Instructions to	Filing Officer:				
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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

Diss. W/Notice
TB 6/2/09

MyLLC.com

5716 Corsa Ave. Suite 110 Westlake Village, CA 91362 888.886.9552 EXT 2402 toll free 818.230.0201 fax

diane.kalinowski@myllc.com www.MyLLC.com

April 24, 2009

FL Secretary of State

Corporation Division

Please file the enclosed Articles of Dissolution for:

Tropical Accents Co.

And a check in the amount of: 35.00 our check# 2057

Please send stamped filed documents to:

ione & Kalmowski

MyLLC.com 5716 Corsa Ave., Suite 110 Westlake Village, CA 91362 888.886.9552 - EXT 2402 toll free 818.230.0201 fax

Thank you – if you have any questions or problems please let me know

Sincerely,

Diane E. Kalinowski

COVER LETTER

1	2009 11000					
COVER LETTER	William Jan					
TO: Amendment Section Division of Corporations	AND MAN CONTROL OF THE STORY BY BY BY ON THE STORY OF THE					
SUBJECT: TROPICAL ACCENTS CO.						
DOCUMENT NUMBER: P07000077525						
The enclosed Articles of Dissolution and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Greg Monterrosa on behalf of MYLLC.COM, Inc.						
(Name of Contact Person)						
MYLLC.COM, Inc.						
(Firm/Company)						
32107 Lindero Canyon Road Suite 124						
(Address)	•					
Westlake Village, CA 91361						
(City/State and Zip Code)						
For further information concerning this matter, please call:						

Enclosed is a check for the following amount:

(Name of Contact Person)

Diane Kalinowski / MYLLC.COM, Inc. at (888

✓\$35 Filing Fee \$\sum \$\\$43.75 Filing Fee & \$\sum \$\\$43.75 Filing Fee & \$\sum \$\\$52.50 Filing Fee,

Certificate of Status Certified Copy

(Additional copy is enclosed)

Certificate of Status & Certified Copy (Additional copy is

enclosed)

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

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



April 30, 2009

MYLLC.COM 5716 CORSA AVE STE 110 WESTLAKE VILLAGE, CA 91362

SUBJECT: TROPICAL ACCENTS CO.

Ref. Number: P07000077525

We have received your document for TROPICAL ACCENTS CO. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

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) 245-6925.

Letter Number: 609A00014613

Teresa Brown Regulatory Specialist II

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:				
	TROPICAL ACCENTS CO.				
SECOND:	The document number of the corporation (if known): P07000077525				
THIRD:	The file date of the articles of incorporation: 07/06/2007				
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: V Olece a. Aweleson				
	(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.)				
	OLENA SWENSON				
	(Typed or printed name of person signing)				
	President/Director (Title of Person Signing)				
	(THIC OF FUSOR 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 I	Dissolution" is optional ar	nd is not required whe	n filing a voluntary dissolut	ion.
Name of Corporation:	Tropical	Accents	Co.	
Date of dissolution will be t specified in the Articles of I		filed with the Departn	nent of State or as	
Description of information t	hat must be included in a	claim:		
Mailing address where clain	ns can be sent: (Claims ca	nnot be sent to the Di	vision of Corporations)	
	52 V	izeinia	ave 2724	
	DELAN	d, Fl, 3	2724	
				
A claim against the above no within 4 years after the filing		barred unless a procee	ding to enforce the claim is	commenced
OLENA	SWENSON		Olev A. Su	elestr
Printed Nam	ne of the Person Filing		Signature of the Person Filing	