P07000115711

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
ALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 25, 2010

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WILLIAM G. CARROLL 13132 48TH CT NORTH ROYAL PALM BEACH, FL 33411

SUBJECT: PHOTOEXPRESSIONS, INC.

Ref. Number: P07000115711

We have received your document for PHOTOEXPRESSIONS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The subject corporation was administratively dissolved on September 25, 2009, for failure to file its 2009 annual report/uniform business report.

To voluntarily dissolve this corporation, Articles of Dissolution must be filed pursuant to chapter 607 or 617, Florida Statutes. Enclosed are forms.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 210A00007344

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Dissolution of Corporation			
DOCUMENT NUMBER: #07000115711			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
William Gr Corroll (Name of Contact Person)			
(Name of Contact Person) Photo Expressions			
(Firm/Company)			
13132 48 th N			
13132 48 th p (Address) Royal Railin Beach FL 33411 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Contact Person) at (561) 632-5668 (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) 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 607.1403, 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: Photo Expressions, INC.	
SECOND:	The document number of the corporation (if known): PO 7000 115 711	_
THIRD:	The date dissolution was authorized: Meich 22 2010	-
	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.	n
	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:	.r
	Signature: (Noting 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) William Go Carroll (Typed or printed name of person signing) President	
	(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:	Photo Expi	essions	INC,	
Date of dissolution will specified in the <i>Articles</i>		tion is filed with	the Department of State or as	
Description of information	on that must be includ	ed in a claim:		

D p	merch o	2 , 201	o was	. Doc.	dod
	•				Photo Expressions
_	of vo	-			•
					

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

13132 48th co	<i>L. P</i>		
Rojal Palm	Beach.	FL	33411
	,		

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.

William Gr Costo 1)

Signature of the Per

Printed Name of the Person Filing