# P07000135026

(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:			
EPPECTIVE DATE			

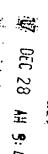
Office Use Only



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# CORPORATE ACCESS, \_

#### When you need ACCESS to the world

INC.

236 East 6th Avenue, Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

# **WALK IN**

	PICK	UP: 12/28 Glinda	_
	CERTIFIED COPY		
XX	РНОТОСОРУ		
	*CUS \		
XX	FILING	Dissolution	
l <b>.</b>	KJH I, Inc. (CORPORATE NAME AND DOCUM	CAPT BY	
	(CORPORATE NAME AND DOCUM	DN [ #)	
2.	(CORPORATE NAME AND DOCUM	ENT #)	
<b>5.</b>	(CORPORATE NAME AND DOCUM	ENT#)	
•	(CORPORATE NAME AND DOCUM	ENT#)	
•	(CORPORATE NAME AND DOCUM	ENT#)	
•	(CORPORATE NAME AND DOCUM	CNUE HA	
PECL	AL INSTRUCTIONS:	CINI #)	

# 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:  KJE 1, INC.					
SECOND	ND: The document number of the corporation (if known):					
THIRD:	The date dissolution was authorized:					
	Effective date of dissolution if applicable:  (no more than 90 days after dissolution file date)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.					
FOURTH	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes east for dissolution was sufficient for approval.  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:  The number of votes east for dissolution was sufficient for approval by					
						(voling group)
						5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5
		MINDA KATZ				
		(Typed or printed name of person signing)				
	VICE 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 no	t required when filing a voluntary dissolution.
Name of Corporation: KJH 1, INC.	
Date of dissolution will be the date the dissolution is filed wi specified in the Articles of Dissolution.	th the Department of State or as
Description of information that must be included in a claim:	
Mailing address where claims can be sent: (Claims cannot be	sent to the Division of Corporations)
Martin Schrier, Esq.	
c/o Cozen O'Connor	
200 S Biscayne Blvd., Suite 3000	
Miami, FL 33131	
A claim against the above named corporation will be barred twithin 4 years after the filing of this notice.	inless a proceeding to enforce the claim is commenced
Martin Schrier, Esq.	
Printed Name of the Person Filing	Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00