0000/89/

(Requestor's Name)	
(Address)	400198117164
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	03/17/1101020008 **35
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	I macket ====================================
Special Instructions to Filing Officer:	MILARREI AM 10:36

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11 APR 21 AM 8: 18

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SEURETARY OF STATE
TALLAHASSEE, FLORIDA

March 18, 2011

DANIT LAVALLE URBAN AXENTS INC 7025 DEL COROSO LANE DELRAY BEACH, FL 33446

SUBJECT: URBAN AXENTS, INC. Ref. Number: P08000018916

We have received your document for URBAN AXENTS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Revocation of Dissolution cannot be filed for an active Florida corporation. If you are trying to voluntarily dissolve the corporation enclosed is information on filing Articles of Dissolution.

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) 245-6908.

Sylvia Gilbert Regulatory Specialist II

Letter Number: 111A00006736

* Here are the correct forms. Please let we know if there is anything else I weld to do. Thank you so much for all your help. D. Cavalle

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of Corp	poration
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee are submitted fo	r filing.
Please return all correspondence concerning this matter to the	following:
Danit Lavalle (Name of Contact Person)	
•	
Urban Axents Inc. (Firm/Company)	
7025 Del Corso Lane (Address)	
De ray Beach, FL (City/State and Zip Code)	33446
For further information concerning this matter, please call:	
Danit Lavalle at (56) (Name of Contact Person) (Area C) 703-6280 odc & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Name of Contact Person) Enclosed is a check for the following amount: [1]\$35 Filing Fee	ee & \$\sumsymbol{\sums
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

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 Departmen	t of Stat	e:
	Urban Axents, Inc.	, <u>.</u>	
SECOND:	The document number of the corporation (if known): Po86000 1991 The file date of the articles of incorporation: 2-2/- 2605	6	
THIRD:	The file date of the articles of incorporation: _2-2/- 2008	3	20
FOURTH:	(CHECK AT LEAST ONE BOX)		2011 APR
	None of the corporation's shares have been issued.		2-
	The corporation has not commenced business.	THE STATE OF THE S	AH TO:
FIFTH:	No debt of the corporation remains unpaid.		ယ
SIXTH:	The net assets of the corporation remaining after winding up have been dist to the shareholders, if shares were issued.	ributed	
SEVENTH:	Adoption of Dissolution (CHECK ONE)		
	A majority of the incorporators authorized the dissolution.		
	A majority of the directors authorized the dissolution.	·	
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	incorporat	tor - if
	(Typed or printed name of person signing)		
	Director / Duner (Title of Person Signing)		

Filing Fee: \$35