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SECRETARY OF STATE OF CORPORATIONS OF CORPORATIONS

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Articles of Dissolu	otion
DOCUMENT NUMBER: 0001\895	6066
The enclosed Articles of Dissolution and fee are subn	nitted for filing.
Please return all correspondence concerning this matter	er to the following:
Doris Peluchett (Name of Contact Pe	te
Sella Development (Firm/Company	
531 S.E. 4th CT	_
Pompano Beach F/ (City/State and Zip	33060 Code)
For further information concerning this matter, please	call:
	954) 784-1029 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certified	nal copy is Certified Copy
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

OIVISION OF CORPORATIONS

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:		
	Bella Development Corporation		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized: 1 30 09		
	Effective date of dissolution if applicable: 1\30\09 (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.		
	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:		
		(voting group)	
	(voting group)		
	Signature: Works Toluchette		
	(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)		
	Dies Teluchette		
	(Typed or printed name of person signing)		
	president		
	(Title of person signing)		

Filing Fee: \$35