P08000035067

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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
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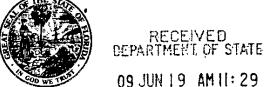
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SECRETARY OF SIATE

Liss C.COULLIETTE JUN 222009 EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	CCONOS, INC.
DOCUMENT NUMBER:	P08000035067
The enclosed Articles of Revocation of Diss	solution and fee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
DIAN	A F. FERNANDEZ
(Nan	ne of Contact Person)
	(Firm/Company)
3003 BEL	LE CHASE CIR
	(Address)
TAMPA, F	L 33634
(City	/State and Zip Code)
For further information concerning this matt	er, please call:
DIANA F. FERNANDEZ	at(813) 401-8890
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	nt:
\$35 Filing Fee Sectificate of Statu	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 8, 2009

DIANA F. FERNANDEZ 3003 BELLE CHASE CIR TAMPA, FL 33634

SUBJECT: ICCONOS INC Ref. Number: P08000035067

We have received your document for ICCONOS 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):

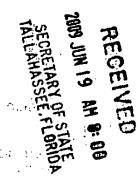
Articles of Revocation of Dissolution cannot be filed for an active Florida corporation. If you are trying to voluntarily dissolve the corporation enclosed is information on filing Articles of Dissolution.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 909A00019153



COVER LETTER

Division of Corporations	
SUBJECT: Dissolution of Corporation / Ic	conos, Inc.
DOCUMENT NUMBER: <u>P08000035067</u>	
The enclosed Articles of Dissolution and fee are submitted fo	r filing.
Please return all correspondence concerning this matter to the	following:
Diana F. Fernandez	
(Name of Contact Person)	
(Firm/Company)	
3003 Belle Chase Cir.	
3003 Belle Chase Cir. (Address)	
Tampa, FL 33634 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
<u>Diana f. fernander</u> at (813 (Name of Contact Person) (Area C) 401-8890 Tode & Daytime Telephone Number)
Enclosed is a check for the following amount:	
<u>_</u>	Tee & \$\sumsymbol{\subset}\$\$52.50 Filing Fee, Certificate of Status & T is Certified Copy (Additional copy is enclosed)
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 607.1403, 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:		
	ICCONOS, ZNC.		
SECOND:	The document number of the corporation (if known): P080000 35067		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: 06/01/09 (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:		
	The number of votes cast for dissolution was sufficient for approval by		
Diana f. fernander			
•	(voting 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)		
	Diana f. fernandee		
	(Typed or printed name of person signing)		
	president/owner		
	(Title of person signing)		

Filing Fee: \$35