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(City/State/Zip/Phone #)			
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Certified Copies	Certificates	s of Status	
Special Instructions to Fili	na Officar		
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Office Use Only



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SECRETARY OF STATE
ALLAHASSITE. FLORID

ردن ک C.COULLIETTE

APR 02 2010

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations			
SUBJECT: NOTICE OF DISS	OLUTION.		
DOCUMENT NUMBER: P08000036275			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
DAVID SLANE			
(Name of Contact Person)			
D.S. CONDO LEASING INC.			
(Firm/Company)			
778 NW 92 AVE. (Address)			
(Add	ress)		
PLANTATION FL 33324 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
DAVID SLANE (Name of Contact Person)	at (954) 837 - 0609 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
Certificate of Status	Standard Status & Certified Copy (Additional copy is enclosed) Standard Status & Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS:	STREET ADDRESS:		
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	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 Department	ent of State:
	DS CONDO LEASING INC.	
SECOND:	The document number of the corporation (if known): POSODO 3	16275
THIRD:	The file date of the articles of incorporation: 04/10/2008	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH:	The net assets of the corporation remaining after winding up have been dito the shareholders, if shares were issued.	Es l
SEVENTH:	Adoption of Dissolution (CHECK ONE)	ECRETAR ELAHASS
	A majority of the incorporators authorized the dissolution.	R-I
	A majority of the directors authorized the dissolution.	MIII: 53 OF STATE EFLORIDA
Sign	ature: (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.) DAVID SLANE (Typed or printed name of person signing)	
	PRESIDENT (Title of Person Signing)	

Filing Fee: \$35