## PD8000041134

| (Re                                     | equestor's Name)   | ,           |
|---|--------------------|-------------|
| (Ac                                     | ldress)            |             |
| (Ac                                     | ldress)            |             |
| (Cit                                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                                 | MAIT               | MAIL .      |
| (Business Entity Name)                  |                    |             |
| (Do                                     | ocument Number)    |             |
| Certified Copies                        | _ Certificates     | s of Status |
| Special Instructions to Filing Officer: |                    |             |
|   |                    |             |
|   | ·                  |             |
|   |                    |             |
|   |                    |             |

Office Use Only



200176991492

04/22/10--01008--011 \*\*35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

AHD155 M.23.10

## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |  |  |
|---|--|--|
| SUBJECT: DISSOLUTION OF STEMPRETING OPLINE, INC.  |  |  |
| DOCUMENT NUMBER: P0800047734  |  |  |
| The enclosed Articles of Dissolution and fee are submitted for filing.  |  |  |
| Please return all correspondence concerning this matter to the following:   |  |  |
| INDARTIT RAMTANAL   |  |  |
| (Name of Contact Person)  |  |  |
| 5 & E MARKETING OALLNE, INC   |  |  |
| (Firm/Company)  |  |  |
| 10049 NW 89th AVE # 1 (Address)   |  |  |
|   |  |  |
| MEDLEY FL 33178   |  |  |
| (City/State and Zip Code)   |  |  |
| For further information concerning this matter, please call:  |  |  |
| Name of Contact Person) (Area Code & Daytime Telephone Number)  |  |  |
| Enclosed is a check for the following amount:   |  |  |
|   |  |  |
| \$35 Filing Fee \$\bigsquare \text{\$43.75 Filing Fee & \$\bigsquare \text{\$43.75 Filing Fee & \$\bigsquare \text{\$52.50 Filing Fee,} \\ Certificate of Status & \$\bigcom{Certified Copy}{(Additional copy is enclosed)}\$\$ (Additional copy is enclosed) |  |  |
| MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:

Filing Fee: \$35