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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: L-SCREENS THE
DOCUMENT NUMBER:
The enclosed Articles of Revocation of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
EDBAR CONCON TR (Name of Contact Person)
(Name of Contact Person)
C-SCREENS INC (Firm/Company)
(Firm/Company)
4017 UE3STZ CT (Address)
LAND D LAKES The 34639 (City/State and Zip Code)
For further information concerning this matter, please call:
EDGAR CONLOW at (813) 431-6557 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\ Certificate of Status \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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

SECRETAR Following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	C-SCREEN, ZMC.
SECOND:	The document number of the corporation (if known):
THIRD:	The file date of the articles of incorporation: $7-2-08$
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 distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Signa	ature: Soar School C (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.)
	(Typed or printed name of person signing)
	PINEATON (Title of Person Signing)

Filing Fee: \$35