## P08000017223

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## **COVER LETTER**

TO: Amendment Section. **Division of Corporations** SUBJECT: Articles of Dissolution of Crazy for Cake **DOCUMENT NUMBER:** \_ The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Amy Lefkowitz (Name of Contact Person) Crazy for Cake (Firm/Company) 177 N.E. Blueberry Terrace (Address) Jensen Beach, FL 34957 (City/State and Zip Code) For further information concerning this matter, please call: Amy Lefkowitz (Name of Contact Person) Enclosed is a check for the following amount: ✓\$35 Filing Fee —\$43.75 Filing Fee & —\$43.75 Filing Fee & —\$52.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	IRST: The name of the corporation as currently filed with the Florida Department of State:	
	Crazy for Cake, INC.	
SECOND:	The document number of the corporation (if known): P08000077223	
THIRD:	The file date of the articles of incorporation: August 20, 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 distributed to the shareholders, if shares were issued.	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	✓ A majority of the incorporators authorized the dissolution.	, <u>p</u>
	A majority of the directors authorized the dissolution.	O9 MAR -6
Sign	(By a director, president or other other court appointed fiduciary, by that fiduciary.)	PH 12:
	Amy Lefkowitz (Typed or printed name of person signing)	
	Director (Title of Person Signing)	

Filing Fee: \$35