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PICK-UP WAIT MAIL	
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(Business Entity Name)	
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(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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2009 AUG 10 PH 4: 46
SECRETARY OF STATE

8/12/09

COVER LETTER

TO: Amendment Section

Division of Corporations

NAONA AU COLU	
SUBJECT: M&M Alternative Solutions inc.	~
DOCUMENT NUMBER:	·
The enclosed Articles of Dissolution and fee are submitted for filing	ng.
Please return all correspondence concerning this matter to the follo	wing:
Michael Corsano & Maria Lynn Kyrkostas	
(Name of Contact Person)	
(Firm/Company)	
1351 Ohio Ave	
(Address)	
Dunedin, Fl 34698	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Maria Lynn Kyrkostas at (727) 6	31 6294
(Name of Contact Person) (Area Code &	& Daytime Telephone Number)
Enclosed is a check for the following amount:	
▼\$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	
Amendment Section Ame Division of Corporations Division of Corporations P.O. Box 6327 Clift Tallahassee, FL 32314 266	EET ADDRESS: endment Section ision of Corporations ton Building I Executive Center Circle ahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to	section 607.1403, Florida Statutes, this Florida profit corporation submits for following articles
of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits appropriate one AUG 10 PH 4:46
FIRST:	The name of the corporation as currently filed with the Florida Department of State: FLORIDA M+M ALTERNATIVE Solutions
SECOND:	The document number of the corporation (if known): PO 8 6000 Fyry
THIRD:	The date dissolution was authorized: June 30 th 2009
	Effective date of dissolution if applicable: June 30 th 2009 (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
	(voting group)
	Signature: (By a director, president of 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)
	Maria Kyrkostas
	(Typed or printed name of person signing)
	Maria Kyrkostas - Director
	(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.
This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation: M&M alternative Solutions inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Abandonment of Corporation by owner Michael O. Corsano.
Unauthorized Removal of all corporate inventory taken by above said.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Maria 1351 Ohio Ave Dunedin Fl 34698
Michael O Corsano 89 Hannah lane Monroe,CT
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Maria Lynn Kyrkostas
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00