PO 8000090540

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section

Division of Corporations	
_{SUBJECT:} Dissolution of Bouyoucas Lav	w, P.A.
D0800000540	
DOCUMENT NUMBER: P08000090540	
The enclosed Articles of Dissolution and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Nicholas Bouyoucas	
(Name of Contact F	Person)
n/a	
(Firm/Compa	ny)
5968 NW Brenda Circle	
(Address)	
Port St Lucie, Florida 34986	
(City/State and Zi	p Code)
For further information concerning this matter, pleas	e call:
	561) 282-7767
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certifi	5 Filing Fee & S52.50 Filing Fee, led Copy Certificate of Status & conal copy is Certified Copy (Additional copy is enclosed)
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 607.1403, 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 of State:
	Bouyoucas Law, P.A.
SECOND:	The document number of the corporation (if known): P08000090540
THIRD:	The date dissolution was authorized: 5/24/10
	Effective date of dissolution <u>if applicable</u> : 5/24/10 (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
	n/a (voting group)
;	Signature: (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)
	Nicholas Bouyoucas
	(Typed or printed name of person signing)
	Sole Owner, Sole Director, Sole Shareholder
	(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: Bouyoucas Law, P.A.
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:
no business was conducted
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Bouyoucas
5968 NW Brenda Circle
Port St Lucie, FL 34986
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.
Nicholas Bouyoucas
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