## 09800008928

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**EXAMINER** 

## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
SUBJECT: CORP. Dissolution.
DOCUMENT NUMBER: <u>P0900008928</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Liney E. TAPIA (Name of Contact Person)
SOCCER PASSION COEP.  (Firm/Company)
1954 N.W. 1834 TR. (Address)
Pembloke Pines, Fl 33029 (City/State and Zip Code)
For further information concerning this matter, please call:
LiNey E. Tapia at (954) 404-7486  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc
MAILING ADDRESS:  Amendment Section  Division of Corporations  P.O. Boy 6327  Clifton Building

2661 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:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	Soccer Passion Corporation.		
SECOND:	The document number of the corporation (if known): Poquasies 89	28	
THIRD:	The file date of the articles of incorporation: JAW 29 2009		
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.	77 A	NVISION OF
SEVENTH:	Adoption of Dissolution (CHECK ONE)	IAR 2	25 KU
	A majority of the incorporators authorized the dissolution.	TI MAR 22 PM 12: 1	COR
	A majority of the directors authorized the dissolution.	1:2	0757
		•	
Signa	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)  Liney E. Tapia  (Typed or printed name of person signing)	if	

Filing Fee: \$35