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SECRETARY

ALLAHASSEE, FLORIDA

COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|---|---|--|
| | re Cerepration | |
| DOCUMENT NUMBER: | 09000021537 | |
| The enclosed Articles of Dissolution and | fee are submitted for filing. | |
| Please return all correspondence concerni | ng this matter to the following: | |
| - | Kim Rossetti | |
| | | |
| (Name o | f Contact Person) | |
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| | rm/Company) | |
| 3 | 030 Phoebe Unic | |
| (1 | Address) | |
| I | Address) Phoebe Lome Jelray Beh 4 33444 | |
| (City/Si | tate and Zip Code) | |
| For further information concerning this m | natter inlease call: | |
| To further information concerning this in | autor, prouse curi. | |
| | at (S61) 445 2487 | |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amo | ount: Already Submitted | |
| \$35 Filing Fee \$\Bigcup\$43.75 Filing Fee & | U z □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, | |
| Certificate of Status | Certified Copy Certificate of Status & | |
| | (Additional copy is Certified Copy | |
| | enclosed) (Additional copy is enclosed) | |
| MAILING ADDRESS: | STREET ADDRESS: | |
| Amendment Section | Amendment Section | |
| Division of Corporations | Division of Corporations | |
| P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building | |
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Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

O

June 18, 2009

KIM M. ROSSETH 3030 PHOEBE LANE

DELRAY BEACH, FL 33444

SUBJECT: PINEAPPLE CAFE & BAKESHOP INC

Ref. Number: P09000021537

We have received your document for PINEAPPLE CAFE & BAKESHOP INC and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

If you are trying to close your corporation, please complete the enclosed form and return for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert Regulatory Specialist II

Letter Number: 509A00020835

ARTICLES OF DISSOLUTION

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

| FIRST: | The name of the corporation as currently filed with the Florida Department of State: |
|----------|---|
| | Pineapple Cafe & Bale Shop In |
| SECOND: | The document number of the corporation (if known): POOOOZ 1537 |
| THIRD: | The file date of the articles of incorporation: $3 - (3 - 3)$ |
| 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. |
| | |
| Sign | ature: (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) |
| | President (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: Preapple Cafe Balle Shap Inc |
| Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. |
| Description of information that must be included in a claim: |
| Never initiated Business |
| |
| |
| |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) |
| , |
| |
| |
| |
| 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. |
| Win Posseti |

Printed Name of the Person Filing