P09000028571

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Ciling Officer	
Special instructions to	riling Officer:	

Office Use Only



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2009 SEP -2 PM 2: 0
SECRETARY OF STATE

RO/4/09

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISSOLUTION OF	CON PORATION
DOCUMENT NUMBER: P040800	28571
The enclosed Articles of Dissolution and fee are submit	tted for filing.
Please return all correspondence concerning this matter	to the following:
CHERIE NOEL (Name of Contact Person	
(Name of Contact Person	on)
STAY KOOL MC (Firm/Company)	2
(Firm/Company)	
1115 LONG LEA (Address)	TERR.
(Address)	
W4LL/NGTON, City/State and Zip Co	3414
(City/State and Zip Co	ode)
For further information concerning this matter, please ca	
	Vol. 1945 - 4/623 Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	·
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Fi Certificate of Status Certified (Additiona enclosed)	l copy is Certified Copy
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section
P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to secti articles of dissol	ion 607.1401, Florida Statutes, this Florida profit corporation submite the tollowing the latest lution:
	ne name of the corporation as currently filed with the Florida Department of State:
SECOND: Th	ne document number of the corporation (if known): 10 90000057/
THIRD: Th	ne file date of the articles of incorporation: 3/30/2009
FOURTH: (C	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.
	e net assets of the corporation remaining after winding up have been distributed he 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.
Signature	By a director, president or other officer - in 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)
	(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. 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: 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.

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