## P09000033494

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SECRETARY OF STATE STATE SECRETARY OF CORPORATIONS

AND 155/CC

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of SOCOM Fitr	ness, Inc.
DOCUMENT NUMBER: P09000033494	
The enclosed Articles of Dissolution and fee are submitted for	or filing.
Please return all correspondence concerning this matter to the	e following:
Nicholas J. Miller	
(Name of Contact Person)	
SOCOM FITNESS, INC.	
(Firm/Company)	
711 N. PINE ISLAND RD #416	
(Address)	
PLANTATION, FL 33324	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Nicholas Miller at (330	_) 219-6065
(Name of Contact Person) (Area (	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (Additional copenclosed)	
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 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

SECOND:	The document number of the corporation (if known): P09000033494
HIRD:	The file date of the articles of incorporation: 04/14/09
OURTH:	(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 distribut 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	(By a director, president or other officer - if directors or officers have not been selected, by an incorp in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	NICHOLAS J. MILLER
	(Typed or printed name of person signing)

Filing Fee: \$35