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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: RIGNIST FOR	dissolution
DOCUMENT NUMBER: Y 5900	2045151
The enclosed Articles of Dissolution and fed	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Donna Talbot	
	Contact Person)
Welcome tome	Company)
12008 South Share Bl	
` ' ` ` ` `	,
Wellengton FL 334	e and Zip Code)
(City/State	e and Zip Code)
For further information concerning this matt	ter, please call:
Doma Tallot (Name of Contact Person)	at (SCI) 762-0736 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amoun	· · · · · · · · · · · · · · · · · · ·
_	<u>_</u>
\$35 Filing Fee \$43.75 Filing Fee & [Certificate of Status	■ \$43.75 Filing Fee & ■ \$52.50 Filing Fee, Certified Copy Certificate of Status & (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

•	ARTICLES OF DISSOLUTION FILED
Pursuant to of dissoluti	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on: [ALLANY OF STATE
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
SECOND:	The document number of the corporation (if known): PO900045/51
THIRD:	The date dissolution was authorized: Effective date of dissolution if applicable: (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
	Shareholders
	(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)
	DONNA Talbot (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: 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

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

within 4 years after the filing of this notice.

Printed Name of the Person Filing