(Requestor's Name)  (Address)	
(Address)	7001738368
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	04/07/100101001
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\*\*43.75

2010 APR -7 AM 8: 40

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:	
111011	Icon Management Group, Inc.	
	0000007867	
SECOND:	The document number of the corporation (if known):	
THIRD:	The date dissolution was authorized:	
	Effective date of dissolution if applicable: 3/22 2000 (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	
	Matt McAty Tamecia Motlow, Shawn Wooden (voting group)	
	20	
	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)	
	Mathew Mathy (Typed or printed name of person signing)	
	President	
	(Title of person signing)	

Filing Fee: \$35

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of a corporation
DOCUMENT NUMBER: 607,1401 / P0900078621
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Matthew McArty (Name of Contact Person)
(Name of Contact Person)
I con Management Group, Inc. (Firm/Company)
405 Sale Mabry Huy Ste 310
405 S. Dale Mabry Hwy Ste 310 (Address)
Tampa, FL 33609 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Math McArty at (813) 494-0959  (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$43.75 Filing Fee \$ \$43.75 Filing Fee \$ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
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