## P090000844009

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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SECRETARY OF STATE
ON OF CORPORATION

AAD155 00 4/18/12

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT:	
DOCUMENT NUMBER: PO9000	00 34609
The enclosed Articles of Dissolution and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
Shane Frankou	170
(Name of Contact Pe	erson)
(F:/C	
413 N Federal Huy	"Hallardale
Hallandale (Address)	DDG
(City/State and Zip	Code)
For further information concerning this matter, please	call:
(Name of Contact Person) at (	251 362-9792 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certifie	onal copy is Certified Copy
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:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	East Coast Management Payroll Services INC
SECOND:	The document number of the corporation (if known): P0900034609
THIRD:	The file date of the articles of incorporation: $\frac{\sqrt{13/3009}}{\sqrt{13/3009}}$
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.)
	Share Frankovic (Typed or printed name of person signing)
	(Title of Person Signing)

Filing Fee: \$35