P09000099700

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

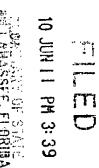
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Roberts IIIN 1 4 2040

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations		
SUBJECT:		· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER:		
The enclosed Articles of Dissolution and for	ee are submitted for filing	<u>5</u> .
Please return all correspondence concerning	g this matter to the follow	ving:
Brian 5 (Name of	M (V GCFAU Contact Person)	
1 Profes	Simond C	water of
(Firm	SSIONAL C n/Company)	of May
	ddress)	pue
Runvew FC	33578	
(City/Sta	te and Zip Code)	
For further information concerning this mat	tter, please call:	
(Name of Contact Person)	at (<u>\$1</u> 85_) 65 (Area Code &	Daytime Telephone Number)
Enclosed is a check for the following amou	nt:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section		ET ADDRESS:

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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 the Cyclic Cycl	of State:	\C.	
SECOND:	The document number of the corporation (if known): PD9002099700			
THIRD:	The date dissolution was authorized:			
	Effective date of dissolution if applicable: 66-11-000 (no more than 90 days after dissolution)	n file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolu	ution	
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled CR	1	
	The number of votes cast for dissolution was sufficient for approval by	TARY OF	ווו דו מי בורבה	
	(voting group)	PM 3: 39 Y OF STATE EE, FLORIDA	>	
S	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)			
	Braw MCGOGAO (Typed or printed name of person signing)			
	CFF.CEN / D (Title of person signing)			

Filing Fee: \$35