## 1000826.

(Requestor's Name)	
· (Address)	900179905
(Address)	
(City/State/Zip/Phone #)	os. <b>767 fd-1</b> 777 <del>5</del> 276
(Business Entity Name)	
(Document Number)	•
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	J.5 J.

Office Use Only

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Sparkle Plenty
DOCUMENT NUMBER: P100608263
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Melina Rayan (Name of Contact Person)
(Firm/Company) 1991D NW9HDV
(City/State and Zip Code) (Address)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 2142593 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed)  Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, 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:	
	sparkle Kenty In		
SECOND:	The document number of the corporation (if known): P10000082	43	
THIRD:	The file date of the articles of incorporation: $\frac{12810}{}$		
FOURTH:	(CHECK AT LEAST ONE BOX)	E in	6167
	None of the corporation's shares have been issued.		TAI
	The corporation has not commenced business.		2
FIFTH:	No debt of the corporation remains unpaid.		9
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	eg.}//a ted	G
SEVENTH:	Adoption of Dissolution (CHECK ONE)		
	A majority of the incorporators authorized the dissolution.		
	A majority of the directors authorized the dissolution.		
Signa	ature:  (By a director, president or other officer if directors or officers have not been selected, by an incoming the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	porator -	if
	(Typed or printed name of person signing)		
	- President		

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. 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 within 4 years after the filing of this notice.

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