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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: CORPORATE DISSOLUTION FOR	FORREST PLANCK ENTERPRISES INC
DOCUMENT NUMBER: P1000069074	
The enclosed Articles of Dissolution and fee are submitted for	filing.
Please return all correspondence concerning this matter to the fo	ollowing:
CAROL WALLS	
(Name of Contact Person)	
FORREST PLANCK ENTERY (Firm/Company)	Prizes Inc
3060 NAUTILUS ROAD	
(Address)	
middleburg FL 3	2068
(City/State and Zip Code)	
For further information concerning this matter, please call:	
CAROL WAUS at (900	172 4000
· · · · · · · · · · · · · · · · · · ·	le) (Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)	Certificate of Status &
	treet Address:
	mendment Section division of Corporations
P.O. Box 6327	he Centre of Tallahassee 415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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:		
	FORREST PLANCK ENTERPRISES INC		
SECOND:	The document number of the corporation (if known): Plococo 69074		
THIRD:	The date dissolution was authorized: July 15, 2624		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w	rill	
	not be listed as the document's effective date on the Department of State's records.		
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.		
	Signature: Catol & Walls		
	(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)		
	CAROL A. WALLS (Typed or printed name of person signing)		
	(Typed or printed name of person signing)		
	VP, S, T (Title of person signing)		
	Filing Fee: \$35		
	Timing Fee. 353		