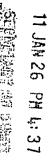
	(Requestor's Name)			
	(Address)			
	(Address)			
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COVER LETTER

TO: Amendment Section

Division of Corporations	5	
SUBJECT: ARTIC	CLES OF DISSOLUT	104
DOCUMENT NUMBER:	P10000070388	
The enclosed Articles of Dissolutio	n and fee are submitted for fili	ng.
Please return all correspondence cor	ncerning this matter to the follo	wing:
	OA L. ARDILA	`
(Na	ame of Contact Person)	
BEST CLEANING SOLLI	(Firm/Company)	10 Corporation.
2638 LEGACY VILLA	5 DRIVE	
	(Address)	
MATLAND, FLORIC	M 32751.	<u> </u>
	City/State and Zip Code)	
For further information concerning t	this matter, please call:	
OLGA L. ARDILA	at (407)	492 6183
(Name of Contact Person)	(Area Code &	& Daytime Telephone Number)
Enclosed is a check for the following	g amount:	
\$35 Filing Fee \$43.75 Filing I Certificate of S		\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations	Amo	EET ADDRESS: endment Section ision of Corporations

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

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FIRST:	The name of the corporation as currently filed with the Florida Department of State	: :
	BEST CLEANING SOLUTIONS OF MAITLAND CORPOR	HOTTAL
SECOND:	The document number of the corporation (if known): P10000070388	,
THIRD:	The file date of the articles of incorporation:	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	3 3 3 3 3 3 3 3 3 3
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.	4.2
	A majority of the directors authorized the dissolution.	
Sign	(By a director, president or other officer - it directors or officers have not been selected, by an incorporate in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) OLGAL, ARDILA (Typed or printed name of person signing)	 or - if
	PPESIDENT (Title of Person Signing)	

Filing Fee: \$35