P100008969

(Requestor's Name)	
(Address)	700233040697
(Address)	
(City/State/Zip/Phone #)	05/03/1201039022 ** 3
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only

Sold of the state of the state

**35.00

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: ENTERTAINMENT PAI	RTY ON INC
DOCUMENT NUMBER: P10000089	669
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning	this matter to the following:
OSCAR HORACIO ZAPATA	
(Name of C	ontact Person)
O.Z. ACCOUNTING SERVICES	
(Firm/	Company)
2097 SW IDAHO LN	
(Add	lress)
PORT ST LUCIE, FL 34953	
	and Zip Code)
For further information concerning this matte	r, please call:
Oscar Horacio Zapata	at (772) 361-3653
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	:
Certificate of Status	\$\[\]\$43.75 Filing Fee & \[\]\$52.50 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 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:
	ENTERTAINMENT PARTY ON INC
SECOND:	The document number of the corporation (if known): P10000089669
THIRD:	The file date of the articles of incorporation: 10/28/10
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.
Signa	(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.)
	INGRID HERRING
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

otice is submitted by the dissolved	corporation named	i below for resol	ution of paymer	nt of unknown	claims
inst 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.

Name of Corpo	ration: ENTERTAINMENT PART	Y ON INC	
	tion will be the date the dissolution is filed with Articles of Dissolution.	the Department of State or as	;
Description of i	information that must be included in a claim:		
			<u></u>
Mailing address	s where claims can be sent: (Claims cannot be s	ent to the Division of Corpora	ations)
	858 SW JASLO AVE		
	PORT ST LUCIE, FL 34953		
			
	the above named corporation will be barred unafter the filing of this notice.	nless a proceeding to enforce t	he claim is commenced
		1	
INGRID H	Printed Name of the Person Filing	Signature of the Po	4/12/12
	Transa radio vi die i erson i mil	Digitalis of the I	

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