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(Re	equestor's Name)	
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DIVISION OF CORPORATIONS
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## **COVER LETTER**

Division of Corporations	
SUBJECT: FIFTH Avedne 4 Less	Zic.
DOCUMENT NUMBER: PIIDOOOO	1640
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
SHARM MARAJ	
(Name of Contac	et Person)
7640 PARKVIEW WAY	pany)
(Address	)
CORAL SPRINGS, FL 33065	
(City/State and	Zip Code)
For further information concerning this matter, ple	ease call:
SHARM MARKT	t(954) 422~3554
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Cer (Add	5.75 Filing Fee & Solution Status & Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee FL 32314	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:	
	FIFTH AVELUE 4 LESS ZAC.	
SECOND:	The document number of the corporation (if known): P100001640	
THIRD:	The file date of the articles of incorporation:	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	44 NCT 28
	The corporation has not commenced business.	7 28
FIFTH:	No debt of the corporation remains unpaid.	777
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.	
Sign	ature:  (By a director, resident or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	- if
	SHARM MARAT	
	(Typed or primed name of person signing)	
	Pres,	
	(Title of Person Signing)	

Filing Fee: \$35