## P/d000033708

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #	*)
PICK-UP	☐ WAIT	MAIL
(B	susiness Entity Name	)
(C	ocument Number)	
Certified Copies	Certificates c	f Status
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SECRETARY OF STATE

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DEPART FOR STATE





IUN SERVICE GUMPANT				
ACCOUNT NO. : I2000000195				
REFERENCE : 561918 7880956				
AUTHORIZATION Sollerace				
COST LIMIT : 1 \$ -35.00				
ORDER DATE: March 7, 2013				
ORDER TIME : 3:13 PM				
ORDER NO. : 561918-011				
CUSTOMER NO: 7880956				
DOMESTIC FILINGS				
NAME: PAMELA E. VASIL, PA				
XX ARTICLES OF DISSOLUTION				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Susie Knight - EXT# 52956				
EXAMINER'S INITIALS:				

## 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 PAMELA E. VASIL, PA	e:	
SECOND:	The document number of the corporation (if known):		
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.		2
FIFTH:	No debt of the corporation remains unpaid.	SECR	UI 3 FA
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	EMRY	HAK i 4
SEVENTH:	Adoption of Dissolution (CHECK ONE)		An io
	A majority of the incorporators authorized the dissolution.	257	07.5
	A majority of the directors authorized the dissolution.	•	
Signa	(By a director, president or other other - if 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.)	_ or - if	
	Pamela E. Vasil		
	(Typed or printed name of person signing)  Director (Tibe of Person Signing)		

Filing Fee: \$35