## PISOCCC GS3 leb

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(Cit	ty/State/Zip/Phone	#)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of FITNFUN In
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
FITN FUN Inc. (Firm/Company)
300 Marina Bay Dr. Unit #105  (Address)  Flagler Beach Fl. 32136  (City/State and Zip Code)
Flagler Beach, Fl. 32136 (City/State and Zip Code)
For further information concerning this matter, please call:  Wray Lynch at (407) 314-555 (Area Code) (Daytime Telephone Number)
Wray Lynch at (407) 314-555 = 3
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee  \$43.75 Filing Fee  \$□ \$43.75 Filing Fee  \$□ \$52.50 Filing Fee,  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## 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:
	FITNEUN Inc.
SECOND:	The document number of the corporation (if known): P180000 68864
THIRD:	The date dissolution was authorized: November 15+, 2
	Effective date of dissolution if applicable: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by  PH OR OF STATE  OR OF S
	(voting group)
	Signature:  (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)  (Typed or printed name of person signing)
	(Title of person signing)