## P22000083250

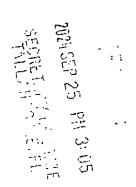
(Requestor's Name)	
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## **COVER LETTER**

<b>TO:</b> Amendment Section Division of Corporations	
SUBJECT:	Clusing Photo Imountions
DOCUMENT NUMBER:	000083250
The enclosed Articles of Dissolution and fe	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
David	Rosen
Photo Imo	Contact Person)  1 UATIONS I, INC.  1/Company)
1391 S.W. 115 AVEAL	'ne
Pembroke P	ines F1. 33025 e and Zip Code)
For further information concerning this mat	ter, please call:
Dayid Rose 1 (Name of Contact Person)	at ( <u>336</u> ) <u>577-0547</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amour	nt:
\$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy Certificate of Status &  (Additional copy is enclosed) (Additional copy of enclosed) (Additional copy of enclosed)  Street Address:
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

## 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:						
	Photo Innovations I, Inc.						
SECOND:	The document number of the corporation (if known): P2200083250						
THIRD:	The file date of the articles of incorporation: $11/14/2022$						
FOURTH:	None of the corporation's shares have been issued.						
FIFTH:	No debt of the corporation remains unpaid.						
SIXTH:	The net assets of the corporation remaining after winding up, if any, have been distributed to the shareholders, if shares were issued.						
SEVENTH:	A majority of the incorporators or directors authorized the dissolution.						
Sign	ature: Tail Rose						
	(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.)						
	David Posen 3						
	(Typed or printed name of person signing)						
	(Title of Person Signing)						
	(Title of Person Signing)						

Filing Fee: \$35

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