## P93.000001813

}	
•	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
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Special Instructions	to Filing Officer:
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Michael R. Harris (561) 893-8717 mharris@bergersingerman.com

April 29, 2009

Amendment Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Helen

Helene Levin Designs, Inc.

Gentlemen:

Enclosed are Articles of Dissolution, Notice of Corporate Dissolution and a check in the amount of \$43.75 in payment of your filing fee, and the fee for a certified copy of the Articles of Dissolution.

Would you please proceed with the filing and contact me if any additional information or documentation is required.

Thank you very much for your assistance.

Very truly yours,

BERGER SINGERMAN

Michael R. Harris

MRH:ebc Enclosures

2093537-1

## 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: HELENE LEVIN DESIGNS, INC.
SECOND:	The document number of the corporation (if known): P9300001813
THIRD:	The date dissolution was authorized: 12/28/07
	Effective date of dissolution <u>if applicable</u> : 12/31/07  (no more than 90 days after dissolution file date)
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
	(voting group)  SSEE, FLORIDA  (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)
	Helene B. Levin  (Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35