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## **COVER LETTER**

<u>co</u>	VER LETTER	
TO: Amendment Section Division of Corporations		PECEIVE: #2009 APR 20 AM 8: 00 SECRETARY OF STATE
SUBJECT: DISSOLUTION OF HOM	E DECOR SUPPLY, NC.	SECRETARY OF STATE TALLAHASSEE FLORIDA
DOCUMENT NUMBER: P 93000	0045753	
The enclosed Articles of Dissolution and for	ee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
MARJA - LEENA SIVEN (Name of		
(Name of	Contact Person)	
(Firm	n/Company)	
820 S. LAKE DR.	•	
(Ad	ddress)	
LANTANA, FL 334	62	
(City/Star	te and Zip Code)	<del></del>
For further information concerning this mat	ter, please call:	
MARJA - LEENA SIVEN (Name of Contact Person)	at (561) 833-48	877
(Name of Contact Person)  Enclosed is a check for the following amou		: Telephone Number)
✓\$35 Filing Fee	Certified Copy Certifi (Additional copy is Certifi	icate of Status & led Copy lional copy is
MAILING ADDRESS:	STREET ADD	
Amendment Section Division of Corporations	Amendment Se Division of Co	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Buildir	
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Tallahassee, FL 32301

## 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:  HOME DECOR SUPPLY, INC.
SECOND:	The document number of the corporation (if known): P930000 45753
THIRD:	The date dissolution was authorized: 12/31/2008  Effective date of dissolution if applicable: 12/31/2008  (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)
	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)
	KIMNO SIVEN (Typed or printed name of person signing)
	TRESIDENT
	(Title of person signing)

Filing Fee: \$35