P9400005366

(Requestor's Name)				
(A	ddress)			
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(Address)				
(Ci	ty/State/Zip/Phone #)		
PICK-UP		MAIL		
(Bi	usiness Entity Name	1		
(Do	ocument Number)			
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Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Dissolution of a Corporation				
DOCUMENT NUMBER: <u>P9+000005366</u>				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Andrew Sneider				
(Name of Contact Person)				
Sneider Management (Firm/Company)				
(· · · · · · · · · · · · · · · · · · ·				
9600 West Sample Load Svite 300 (Address)				
Coral Springs, Horida 33065 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Andrew Sneider at (56) 702.3182 (Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$35 Filing Fee \$\times \$43.75 Filing Fee & Certificate of Status \$\times \$\text{Certified Copy} & Certificate of Status & Certified Copy (Additional copy is enclosed) \$\text{(Additional copy is enclosed)}\$				
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section				
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle 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:			
	5340 North Federal Highway Association, In	۰.		
SECOND:	The document number of the corporation (if known): P9400005366			
ΓHIRD:	The date dissolution was authorized: January 1, 2009			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)			
FOURTH:				
	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			
	MAY ALL (voting group) AHASSI (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)	· tu		
	ANDREW SNEDER			
	(Typed or printed name of person signing)			
	(Title of person signing)			

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

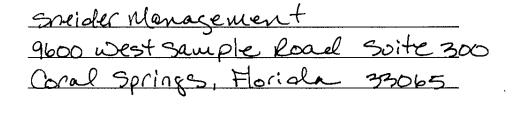
This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: 5340 North Fealeral Highway Association, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:					
www.make	411445				
	January 1980				

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)



A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00