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(Requestor's f	Name)	
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(City/State/Zip	/Phone #)	
(Business Ent	ity Name)	
(Document Number)		
Certified Copies Cert	ificates of Status	
Special Instructions to Filing Officer:		
Office L	lse Only	

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# ADAMS AND REESE LLP

Attorneys at Law Baton Rouge Birmingham Houston Jackson Memphis Mobile Nashville New Orleans Washington, DC

December 27, 2007

#### BY FEDERAL EXPRESS

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Department of State State of Florida Division of Corporations 2661 W Executive Center Cir Clifton Building Tallahassee, FL 32301-5020

Re: Capital Factors Holding, Inc.

Ladies and Gentlemen:

On behalf of Capital Factors Holding, Inc., I enclose for filing and processing its articles of dissolution.

I also enclose our firm's check number 042814 in the amount of \$35.00, representing payment of the filing fee.

Please return a file stamped copy of the articles of dissolution. I have included an extra copy and a self addressed, stamped envelope for this purpose.

Thank you for your attention to this filing. Please let me know as soon as possible if you require additional information.

Yours truly, Mulufin Mey

Charles C. Pinckney

CCP/pd Enclosures

### **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:

Capital Factors Holding, Inc.

SECOND: The document number of the corporation (if known): P94000032586

THIRD: The date dissolution was authorized: December 19, 2007

Effective date of dissolution if applicable: N/A

(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 entitient 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)

Michael G. Levine

(Typed or printed name of person signing)

#### President

(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: Capital Factors Holding, 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:

Name and address of the individual or entity making the claim; amount of the claim; approximate date of the event or events giving rise to the claim; brief description of the factual and legal basis for the claim; and the telephone number at which the claimant can be reached.

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

Office of the General Counsel

**Regions Bank** 

1901 Sixth Avenue N, 18th Floor

Birmingham, AL 35203

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.

Michael G. Levine

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