Lillian	10000	4230	79	
3598 NE	questor's Name 19th Ave. Address Address Virolate Ft. 3336 Zip Phone #	08		
	NAME(S) & DOCUM		Office Use Onl	ly
	poration Name)			
2(Corp		(Document		
3. <u>(Corp</u>		(Document	l #)	
(Corp	oration Name)	(Document	_	
r	Pick up time Will wait		Certified Copy Certificate of Status	
NEW FILINGS	AMENDMENT Amendment	S	3000021 -05/12/9	746133 701055009 .00 *****35.00
NonProfit Limited Liability	Resignation of R.A., Change of Registered			
Domestication Other	Dissolution/Withdra	wal	SEChe. TALLAHI	97 HA1
OTHER FILINGS	REGISTRATI QUALIFICA		TALLAHASSEE, FLORIDA	TILED
Annual Report Fictitious Name	Foreign Limited Partnership		ORIDA	0. 25
Name Reservation	Reinstatement Trademark			
	Other			

Examiner's Initials

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 is: LII'S Perfect 67'5+	D	<u>v</u> (
SECOND:	The date dissolution was authorized: 4-1-97		-
THIRD:	Adoption of Dissolution (CHECK ONE)		
	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.	ıtion	
	solution was approved by vote of the shareholders through voting groups.	97	
The following statement must be separately provided for each voting group Alexantely on the plan to dissolve:			FE
The	number of votes cast for dissolution was sufficient for approval by	12 AND	ILED
	Pres + Vice Pres.	2 0: -	
	(voting group)	35	
Signe	ed this 22 day of April , 19 97		
Signature _e	(By the Chairman or Vice Chairman of the Board, President, or other officer)	-	
	L'. II, AN M. Stewart (Typed or printed name)		
	Owner Pres.		