P94000051132

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O7 NOV 15 PM 4: 41

T. Roberts NOV 2 1 2007

COVER LETTER

TO: Amendment Section Division of Corporations	
•	chana Information lexivées, Inc.
DOCUMENT NUMBER: 65050	7894
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
TIMOTHY OLSON (Name of	f Contact Person)
ATHENA INFORMATION	
297 W. ARTESIA S+	Address)
OVIEDO, FL 32765 (City/Sta	<u> </u>
(City/Sta	ate and Zip Code)
For further information concerning this ma	atter, please call:
TIMOTHY OLSON (Name of Contact Person)	at (407) 366-6133 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	unt:
\$\frac{1}{\mathbb{X}}\$35 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	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 a	section 607.1401, Florida Statutes, this Florida profit corporation submits the following PM 4. issolution: The name of the corporation as currently filed with the Florida Department of State:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	ATHENA INFORMATION SERVICES, INC.
SECOND:	ATHENA INFORMATION SERVICES, INC. The document number of the corporation (if known). P9400051132
THIRD:	The file date of the articles of incorporation:
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: (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.)
	TIMOTHY E OISON (Typed or printed name of person signing)
	VICE PRES (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

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: ATHENA INFORMATION SERVICES 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: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 297 W. ARTESIA OU(EDO, FL 32765

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.

against this corporation as provided in s. 607.1407, F.S.