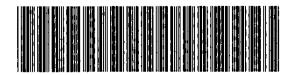
## P94000074406

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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No Mis

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Amendment Section

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32314

| SUBJECT: DISSOLUTION   |   |  |
|--|---|--|
| DOCUMENT NUMBER: P94000074406                                  |   |  |
| The enclosed Articles of Dissolution and                       | fee are submitted for filin   | g.   |
| Please return all correspondence concerni                      | ng this matter to the follow  | ving:  |
| KATHERINE T. MORGAN  |   |  |
| (Name of   | f Contact Person)   |  |
| KATHERINE MORGAN & ASSOCIATES INC                              |   |  |
| (Fit   | m/Company)  |  |
| 6238 N.W. 23RD STREET  |   |  |
| ()   | Address)  |  |
| BOCA RATON, FLORIDA 33434                                      |   |  |
| (City/St   | ate and Zip Code)   |  |
| For further information concerning this ma                     | atter, please call:   |  |
| KATHERINE T. MORGAN  | at (at  |  |
| (Name of Contact Person)                                       | (Area Code)   | (Daytime Telephone Number)   |
| Enclosed is a check for the following amo                      | ount:   |  |
| □ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status | □ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS:   | STR   | EET ADDRESS:   |

Amendment Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

## 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:   |  |  |
|---------|--|--|--|
|         | KATHERINE MORGAN & ASSOCIATES, INC.  |  |  |
| SECOND: | The document number of the corporation (if known):   |  |  |
| THIRD:  | The date dissolution was authorized:   |  |  |
|         | Effective date of dissolution if applicable:   |  |  |
|         | (no more than 90 days after dissolution file date)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. |  |  |
| FOURTH: | Adoption of Dissolution (CHECK ONE)  |  |  |
|         | Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.  |  |  |
|         | 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  |  |  |
|         | 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 of officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, drother court appointed fiduciary, by that fiduciary)                                 |  |  |
|         | KATHERINE T. MORGAN  |  |  |
|         | (Typed or printed name of person signing)  |  |  |
|         | PRESIDENT  |  |  |
|         | (Title of person signing)  |  |  |