Pgym	085391
(Requestor's Name) (Address) (Address)	800215638308
(City/State/Zip/Phone #)	01/05/1201005009 **35.00
(Business Entity Name) (Document Number)	· .
Certified Copies Certificates of Status	12 JAB & PH 2: 54 SECRETARY OF SINIE TALL ANASSEE, FLIMID,
Office Use Only	

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Dissolution of Rudolph Management Associates, Inc. 00085391 **DOCUMENT NUMBER:** 

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

es CPA (Name of Contact Person) Jates Berg Klein (Firm/Company) suchoilau Kd (Address) (City/State and Zip Code lelvi

For further information concerning this matter, please call:

at (<u>631</u>) <u>845-5257</u>. (Area Code & Daytime Telephone Number) (Name of Contact Person)

Enclosed is a check for the following amount:

\$35 Filing Fee \$\$43.75 Filing Fee \$\$43.75 Filing Fee \$\$52.50 Filing Fee, Certificate of Status (Additional copy is enclosed) (Additional copy is enclosed)

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FROM

## **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	::	
	Rudulph Management Associates]	Fre		
SECOND:	The document number of the corporation (if known): P9400008	539		-
THIRD:	The date dissolution was authorized: 123111			
	Effective date of dissolution if applicable: [2] [3] [1] (no more than 90 days after dissolution	on file date	}	-
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes easi was sufficient for approval.	t fo <b>r</b> dis	solutic	11
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled		
	The number of votes cast for dissolution was sufficient for approval by	SECRE IZ	12 月景	
¥– s	(voting group) ignature: (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)	ETARY OF STATE HASSEE FLORIDA	5 PM 2: 5 L	AND AND THER
-	Arthur Rudolph (Typed or printed name of person signing)			
-	President			
	(Title of person signing)			

Filing Fee: \$35