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(Address) (Address) (Address)				
(City/State/Zip/Phone #)	<b>05</b> /01/0801050013 **35.00			
Certified Copies Certificates of Status	BIVISION OF CORPORATIONS 06 MAY - 1 AM 9:58			
Office Use Only	10/11, Dir. 05/08/06 2			

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Corporate Dissolution

## **DOCUMENT NUMBER:**

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

Please return all correspondence concerning this matter to the following:

Michael usiner Name of Contact Person (Firm/Company) 14877 Stirrap Lance (Address) Wellington, FL 33414 (City/State and Zin Code)

For further information concerning this matter, please call:

Michael Dubiner at (561) 352-5050 (Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

S35 Filing Fee\$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee,<br/>Certificate of StatusCertified Copy<br/>(Additional copy is<br/>enclosed)Certificate of Status &<br/>Certified Copy<br/>(Additional copy is

## MAILING ADDRESS:

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

enclosed)

## **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 $Dubiner \perp Wilensky, P. A.$	of Sta	te:		
SECOND:	The document number of the corporation (if known):				
THIRD:	The date dissolution was authorized:				
	Effective date of dissolution <u>if applicable</u> : <u>5/1/06</u> (no more than 90 days after dissolution	n file da	ute)		
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 entitled to vote separately on the plan to dissolve:					
The number of votes cast for dissolution was sufficient for approval by					
			2		
	(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)	06 MAY -1 AM 9:58	FILED SECRETARY OF STATE VISION OF CORPORATIONS		
	Michael Dubiner (Typed or printed name of person signing)				
	President				
	(Title of person signing)				

Filing Fee: \$35