## P95000052549

(Re	equestor's Name)	·
(Ad	ddress)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(В	usiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificate:	s of Status
Special Instructions to Filing Officer:		
		İ
<u> </u>		

Office Use Only



400021358754

07/10/03--01048--015 \*\*49.75



Vol. Dissolution Am 7/14/03 Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Fl. 32314

July 7, 2003

To Whom it may concern,

Dissolution was approved by the shareholders of this Corporation known as "Windy City Colors, Inc.". Enclosed is a check for \$43.75 for the filing fee and for one certificate of status. (\$35 + \$8.75). Please mail the certificate of status to the following address:

Phil Grossman 6128 Edwards Rd. Margate, Fl. 33063

My Phone number is 954-972-2777. If you have any questions, Please call.

Thank you

Phil Grossman

President (Windy City Colors, Inc.)

## 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: WINDY CTTY COLORS, INC.
SECOND:	The date dissolution was authorized: JULY 3, 2003
THIRD:	Adoption of Dissolution (CHECK ONE)
	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
Dis	solution was approved by vote of the shareholders through voting groups.
	The following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
	(voting group)
Sig	gned this $3^{20}$ day of $50^{10}$ day of $2003$ .
Signature _	(By the Chairman of the Board, President, or other officer)
	PHILLIP S. GROSSMAN.  (Typed or printed name)
	PRESIDENT (Title)