## P9500058043

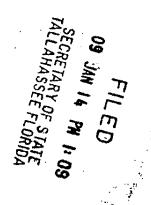
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(During Fall's Mars)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
V.
, V <sub>A</sub> ,
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Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of C	orpiration
SUBJECT: DISSOLUTION OF COUMENT NUMBER: Pago	00068043
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning t	this matter to the following:
She	evi Beltran
(Name of Co	ontact Person)
Trompe (Firm/	L'oeil
·	
1540 Sawgrass	Village Dv. Pork Vedra Fl 32082 dress)
Pont Vedra 12. 3 (City/State	2082 and Zip Code)
For further information concerning this matte	•
Sheri Belitran	(Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	•
✓\$35 Filing Fee ☐\$43.75 Filing Fee & ☐	\$43.75 Filing Fee & \$552.50 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
	(Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## 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:		
	Trimpe L'oeil Classique, Inc.		
SECOND:	The document number of the corporation (if known): P9600058 043		
THIRD:	D: The date dissolution was authorized:  2 3  08		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)		
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		
	Shave holders (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)		
	Shevi Beltvan		
	(Typed or printed name of person signing)		
	Drusident		
	(Title of person signing)		

Filing Fee: \$35