Shelia / Rec LOTI-C L Temple City/State/	M. Coles questor's Name Cale free Cane Address Tenace, Fla. 33 Zip Phone #	06/7-1626 Office Use 0	Only
CORPORATION	NAME(S) & DOCUMENT NU	MBER(S), (if known):	
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1(Corp	oration Name) (.	Document #)	•
2. <u>(Corn</u>	oration Name) (Document #)	
2			
Corp	oration Name) (Document #)	
4(Corn	oration Name) (Document #)	
(COI)	oration realite)	Document #)	
☐ Walk in	Pick up time	_ Certified Copy	
☐ Mail out	Will wait Photocopy	Certificate of Sta	tus
== NEW FILINGS	AMENDMENTS		
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/Di	rector 0000C	128123909 /19/99-01003-009
Limited Liability	Change of Registered Agent	**	****43.75 ******43.75
Domestication	Dissolution/Withdrawal		99 I
Other	Merger		ASSET TO
OTHER FILINGS	REGISTRATION/		FILED MAR 19 PM 12: 1
Annual Report	QUALIFICATION	WD _A	W. W.
Fictitious Name	Foreign		18
Name Reservation	Limited Partnership	<u> </u>	-
	Reinstatement		R 9 19991
	Trademark	4M	B 1
	Other		

Examiner's Initials

ARTICLES OF DISSOLUTION

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: The name of the corporation is: Well Commeller 5933 60454 FIRST: The filing date of the articles of incorporation was:___ SECOND: THIRD: (CHECK ONE) None of the corporation's shares have been issued. ☐ The corporation has not commenced business. FOURTH: No debt of the corporation remains unpaid. FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. Adoption of Dissolution (CHECK ONE) SIXTH: majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signature (By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)