P960000027090

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
	· 	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
	,	
Certified Copies	Cartificator	of Status
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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T. Hoberts NOV 12 0 2008



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 22, 2008

11-15-08 Enclosed are original Lane Hard

B. LANE HASLER B. LANE HASLER P.C. 1530 S STATE ST #17A CHICAGO, IL 60605

SUBJECT: KEY WEST BREWERY INC.

Ref. Number: P96000027090

We have received your document for KEY WEST BREWERY INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 308A00054661

COVER EFTTER

TO: Amendment Section			
Division of Corporations			
SUBJECT: Articles of Dissolution			
DOCUMENT NUMBER: P961	000027090		
The enclosed Articles of Dissolution and fee	e are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
B. Lane	Haster		
(Name of C	ontact Person)		
B. Lane Hasler P.C.			
(Firm	(Company)		
1530 5	s. State St #17A		
(Ad	dress)		
Chicag	o IL 60605		
	e and Zip Code)		
For further information concerning this matt	er, please call:		
B. Lane Hasler	at (312) 893-055)		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amoun	it:		
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$\begin{array}{c} \$52.50 Filing Fee, \\ Certificate of Status & \\ Certificate Copy \\ (Additional copy is \\ enclosed) \end{array} \text{(Additional copy is \\ enclosed)}		
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

ARTICLES OF DISSOLUTION

of dissolut	o section 607.1403, Florida Statutes, this Florida profit corporation submits the following article ion:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Key West Brewery Inc.
SECOND:	The document number of the corporation (if known): P96000027090
THIRD:	The date dissolution was authorized: September 19, 2008
	Effective date of dissolution if applicable: September 19, 2008 (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
	(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)
	Arthur Trotman
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation na	med below for resolution of payment of unknown claims
against this corporation as provided in s. 607.1407, F.S.	

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corpora	ation: Key west browing Inc.
	on will be the date the dissolution is filed with the Department of State or as Articles of Dissolution .
Description of in	formation that must be included in a claim:
Name o	of Claimant
Postal	address of Claimant
Telepho	one, factinite and e-mail of Claimant Representative
Amour	it of Claim
Date	Claim incurred and specific description including supporting
	documentation
Mailing address	where claims can be sent: (Claims cannot be sent to the Division of Corporations)
_	Key West Brewery, Inc.
_	clo B. Lane Hasler
_	1530 S. State St #17A
_	Chicago, IL 60605
	the above named corporation will be barred unless a proceeding to enforce the claim is commenced ter the filing of this notice.
	D PM
	B. Lane Hasle Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00