P96000054417

Req	uestor's Name		
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ROSS & R	OSS g & Tax Service, P.A.	1	
3033 Hartl	ley Road, Suite 4		0.00
	le, FL 32257-6280		Office Use Only
CORPORATION N	NAME(S) & DOCUMENT	NUMBER(S	S), (if known):
1(Corpo	ration Name)	(Document #	4
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(Corpo	ration Name)	(Document #	(1)
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Walk in Mail out EWFILINGS Profit NonProfit Limited Liability Comestication Other OTHER FILINGS Annual Report	Pick up time Will wait Photoe AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Ager Dissolution/Vithdrawal Merger REGISTRATION QUALIFICATION	copy cr/ Director at	Certified Copy Certificate of Status 40000289107406/01/99011090 ******35.00 *******
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Walk in Mail out Mail out Description Profit NonProfit Limited Liability Domestication	Pick up time Will wait Photoe AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Ager Dissolution/Vithdrawal Merger REGISTRATION QUALIFICATION Foreign	copy cr/ Director at	Certified Copy Certificate of Status 40000289107406/01/99011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090110901109011090

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

March 17, 1999

ROSS & ROSS ACCOUNTING & TAX SERVICE, P.A. 3033 HARLEY ROAD SUITE 4 JACKSONVILLE, FL 32257-6280

SUBJECT: CRESWOOD CREATIONS, INC. Ref. Number: P96000054417

We have received your document for CRESWOOD CREATIONS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6905.

Thelma Lewis Corporate Specialist Supervisor

Letter Number: 599A00013042

ARTICLES OF DISSOLUTION

Pursuant to following a	section 607.1403, Florida Statutes, this Florida profit corporation submits the reticles of dissolution:
FIRST:	The name of the corporation is: <u>CRESWOOD</u> <u>CREATIONS</u> , <u>Two.</u>
	P96 0000 54417
SECOND:	The date dissolution was authorized: $\frac{6/23/98}{}$
THIRD:	Adoption of Dissolution (CHECK ONE)
Diss was	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
☐ Diss	olution was approved by vote of the shareholders through voting groups.
T es	he 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)
Signe	d this, 19
	Charles A. Ross, A Selectary Treasurer (By the Chairman or Vice Chairman of the Board, President, or other officer)
	Charles R. Ross, II (Typed or printed name) SECRETARY / TREASURER (Title)
	SECRETARY / TREASURER (Title)