

P97000049083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

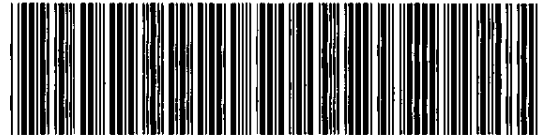
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/27/09--01036--003 \*\*35.00

FILED  
09 FEB 27 PM 3:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Voldis w/notice  
New's  
3-3-09*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISSOLUTION OF MR RAIMO, INC.

**DOCUMENT NUMBER:** P97000049083

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAIMO SEPPANEN

(Name of Contact Person)

(Firm/Company)

517 GREYNOLDS CIRCLE

(Address)

LANTANA, FL 33461

(City/State and Zip Code)

For further information concerning this matter, please call:

SAME AS ABOVE

(Name of Contact Person)

at ( )

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee     \$43.75 Filing Fee & Certificate of Status     \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)     \$52.50 Filing Fee, Certificate of Status & Certified Copy (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**

Pursuant to section 607.1401, 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:

MR RAIMO, INC.

SECOND: The document number of the corporation (if known): P97000049083

THIRD: The file date of the articles of incorporation: 06/02/1997

FOURTH: (CHECK AT LEAST ONE BOX)

None of the corporation's shares have been issued.

The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

A majority of the incorporators authorized the dissolution.

A majority of the directors authorized the dissolution.

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TALLAHASSEE, FLORIDA

Signature: Raimo Seppanen 2/24/09

(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.)

Raimo Seppanen

(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 named 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 Corporation: MR RAIMO, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

NAME AND ADDRESS OF CLAIMANT, EXPLANATION WHERE  
THE CLAIM HAS ARISEN.

NO KNOWN CLAIMS AGAINST THE CORPORATION EXISTS  
AS OF 12/31/2008.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

517 GREYNOLDS CIRCLE  
LANTANA, FL 33461  
   
 

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

RAIMO SEPPANEN  
Printed Name of the Person Filing

*Raimo Seppanen*  
Signature of the Person Filing