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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Aurora Fa	wn, Inc.
DOCUMENT NUMBER: P9	70000 69043
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Rosa Hen	Vandez of Contact Person)
	e Morsey & Sod The
	Vie Blud. Address)
Naples, Fr	3 4119 - 9592 tate and Zip Code)
(City/S	tate and Zip Code)
For further information concerning this m	natter, please call:
Rosa Hernandez (Name of Contact Person)	at (239) 455- 7233 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amo	
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & Certificate of Status	Certified Copy Certified Copy Certified Copy Certificate of Status & Certified Copy enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section	STREET ADDRESS:
Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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:
	Aurora Farm, Ive.
SECOND:	The document number of the corporation (if known): P97 0000 89043
THIRD:	The date dissolution was authorized: 11-2-05
	Effective date of dissolution <u>if applicable:</u> (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 of 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:
	SSE F
	(voting group) (voting group) (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)
	Rosa Hernandez (Typed or printed name of person signing)
	President Secretary, Treasure, Director

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. 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: lane, address, telephone number of Claimant. lature of Claim & Proof of such claim Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Attn: Rusa Hernandez 14765 Collier Blud. 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. Rosa Hernandez

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