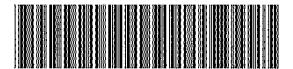
## P97000108416

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200064967962

Voldis Motice T. Lewis



02/06/08--01009--012 \*\*35.0

## COVER LETTER

TO: Amendment Section Division of Corporations	- ·
SUBJECT: Comporate	Dissolution
DOCUMENT NUMBER: P97000/	08416
The enclosed Articles of Dissolution and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Mark FACTEN	
(Name of Contact	Person)
PO Box 6862	any)
POBOX 6862  Brandon FL 33	3508
(City/State and Z	
For further information concerning this matter, plea	se call:
MARK FACAL at	(813) 495-4029
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certif	75 Filing Fee & \$\sum \\$52.50 Filing Fee, Great Copy Great Great Great Copy Great Great Great Great Copy Great
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

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:
	THEMED IMAGES, INC.
SECOND:	The document number of the corporation (if known): 197000 A8476
THIRD:	The date dissolution was authorized: $\frac{12/31/05}{}$
	Effective date of dissolution if applicable: 23/05 (no more than 90 days after dissolution file date) on
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:
	The number of votes cast for dissolution was sufficient for approval by
	Mark Facer
	(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
	HARL E FAGAL
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)

Filing Fee: \$35

CE# 1112



This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1437, F.S.

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

Name of Corporation: / HEMED IMAGES, 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:
Closed Doors on 12/31/05
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
PO BOX 6865 Brankon FL 3350P
Brancon F1 33508
813-495-4029
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.

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