

P98000032797

(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



200104442612

06/29/07--01006--013 \*\*35.00

07 JUL 20 AM 12: 23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
07 JUL 20 AM 8: 03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

APPROVED  
AND  
FILED

*Miss*

G. Coulliette JUL 23 2007

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Millennium MM, Inc.

**DOCUMENT NUMBER:** P 98 0000 32797

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

Please return all correspondence concerning this matter to the following:

Philip Shenkman  
(Name of Contact Person)

Shenkman & Newman CPA P.A.  
(Firm/Company)

12515 N. Kendall drive #314  
(Address)

Miami FL  
(City/State and Zip Code)

For further information concerning this matter, please call:

Philip Shenkman at (305, 271-8585)  
(Name of Contact Person) (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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 2, 2007

PHILIP SHENKMAN  
SHENKMAN & NEWMAN CPA PA  
12515 N. KENDALL DR., #314  
MIAMI, FL 33172

SUBJECT: MILLENNIUM MM, INC.  
Ref. Number: P98000032797

We have received your document for MILLENNIUM MM, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must have original signatures.

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) 245-6903.

Cheryl Coulliette  
Document Specialist

Letter Number: 107A00042661

RECEIVED  
07 JUL 20 AM 8:00  
DIVISION OF CORPORATIONS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Millennium MM, Inc.

**DOCUMENT NUMBER:** P 98000032797

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

Please return all correspondence concerning this matter to the following:

Philip Shenkman  
(Name of Contact Person)

Shenkman & Newman CPA, P.A.  
(Firm/Company)

12515 N. Kendall Drive # 314  
(Address)

Miami FL 33186  
(City/State and Zip Code)

For further information concerning this matter, please call:

Philip Shenkman at (305) 271-8585 ext #204  
(Name of Contact Person) (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)
- Already sent*

**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 607.1403, 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:

Millennium MM, Inc.

SECOND: The document number of the corporation (if known): P98000032797

THIRD: The date dissolution was authorized: 10/19/2006

Effective date of dissolution if applicable: 10/19/2006  
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

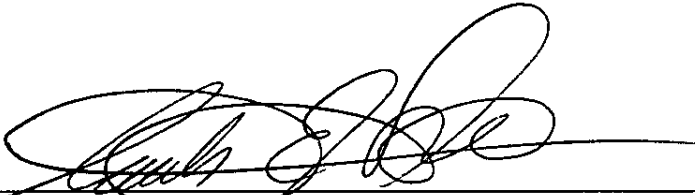
Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

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)

CARLOS E LOPEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

07 JUL 20 AM 8:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVE  
AND  
FILED