P98000078631

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	Certificate	s of Status
,	_	
Special Instructions to	Filing Officer:	
		ł
٠		·





700173088947

03/25/10--01019--015 **35.00

SECRETARY OF STALE TALLAHASSEE, FLORING

AND FILED



COVER LETTER

TO: Amendment Section

Division of Corporations

DOCUMENT NUMBER: ___ The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) Met Mortgage Corp
(Firm/Company) 2330 Pinellas Point Dr S (Address) St Petersbug F 33712 (City/State and Zip Code) For further information concerning this matter, please call: Thomas Holza at (727) 322 - 8181

(Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$35 Filing Fee \$43.75 Filing Fee & \$\infty\$\$\$\$ \$152.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 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:			
	Met Mortgage Corp			
SECOND:	The document number of the corporation (if known):			
THIRD:	The date dissolution was authorized: 3b3/10			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution for	ile date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval.	or dissolution		
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group en to vote separately on the plan to dissolve:	= -		
	The number of votes cast for dissolution was sufficient for approval by	OFEB 25 PHI SECRETARY OF ALLAHASSEE, F		
	Thomas Holzer (voting group)	SEE.		
	(voting group)	25 PH 12: 38 [ARY OF STATE ASSEE, FLORIDA	,	
	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)			
	Thomas Holzen			
	(Typed or printed name of person signing)			
	(Title of person signing)			

Filing Fee: \$35