## P98000/1//

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

Office Use Only



800108095828

08/21/07--01012--014 \*\*35.00



## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations SUBJECT: Notice Of Dissolution DOCUMENT NUMBER: P98000101111 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mrs. Kathy Mahoney (Name of Contact Person) (Firm/Company) P.O. Box 7211 (Address) Jupiter Florida 33468 (City/State and Zip Code) For further information concerning this matter, please call: at (561 Mrs. Kathy Mahoney v 741-2956 (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ✓\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee. Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 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:

Filing Fee: \$35