			-		
Poop Requ	DOO lester's Name	00)4.	56	51
City/State/Zip	Michele Malooley 1066 Salmon Isle West Palm Beach, FL 33 Phone #	·	70	0000320 -04/10/00- *****35.0	19278 -01130016 0 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	
(Corporation Name)	(Document #)
2.	40.8
2. (Corporation Name)	(Document #)
	AFT
3 (Corporation Name)	(Document #)
(corporation reame)	
4.	(Document #)
(Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
 NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name 	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/OUALIFICATION Foreign Limited Partnership Reinstatement Jold 35 Other
	Other V. SHEPARD APR 18 2000
0000000000	Examiner's Initials

ARTICLES OF DISSOLUTION

ODAPRID AMII:03 Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the follow articles of dissolution:

The name of the corporation is: Air Conditioning Experts FIRST:

SECOND: The filing date of the articles of incorporation was:____ 5-17-99 THIRD:

(CHECK ONE)

□ None of the corporation's shares have been issued.

The corporation has not commenced business.

- FOURTH: No debt of the corporation remains unpaid.
- The net assets of the corporation remaining after winding up have been distributed FIFTH: to the shareholders, if shares were issued.
- SIXTH: Adoption of Dissolution (CHECK ONE)

A majority of the incorporators authorized the dissolution.

□ A majority of the directors authorized the dissolution.

. Signed this _____ day of _____ ____,1<u>%_2000</u>. pril

Signature *

(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)

MICHELE	<u>A.</u>	MALOXEY	2
		(Typed or	

d or printed name)

president

(Title)