P99000075093

(Requestor's Name)
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C DIOKUD C WATE C MAIL
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

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COVER LETTER

Division of Corporations	
SUBJECT: Voluntary Dissolution	
DOCUMENT NUMBER: P990007509	3
The enclosed Articles of Dissolution and fee are submitted f	or filing.
Please return all correspondence concerning this matter to the	e following:
James Manierie	
Name of Contact Person) Of this, not a comment ins	
(Firm/Company)	
1220 16th St.	
(Address) Mamil Black 72 33/2	×6
Code)	of Marian
For further information concerning this matter, please call:	Act of the
Tames Many at 305 (Name of Contact Person) at 205 (Area of Contact Person)	706 6900
(Name of Contact Person)	Code & Daytime Telephone Number)
Enclosed is a check for the following amount: □\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing I Certificate of Status Certified Copy (Additional copenciosed)	
MAILING ADDRESS: (City is a to and Zip Code) Amendment Section Division of Corporations ig this matter phase call: 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 S Plastic Mation, Inc.	tate:	
SECOND:	: The document number of the corporation (if known): P990000 75	5093	3
THIRD:	The date dissolution was authorized:		_
	Effective date of dissolution if applicable: 101000 (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 was sufficient for approval.	dissoluti	ion
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group enti to vote separately on the plan to dissolve:	tled	
	The number of votes cast for dissolution was sufficient for approval by	210	
ı	Por Control of the Co	2009 OCT 21	77
	(voting group);		L
	The transfer (CHOCK CND)	MI: 17	C
	A Company of the state of the s		
	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)		
	Northan Seskin		
	(Typed or printed name of person signing) PKS 1964		
	(Title of person signing)		

Filing Fee: \$35