099000105047

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		<u></u>

Office Use Only



000171982760

03/15/10--01017--004 **35.00

1



COVER LETTER

TO: Amendment Section				
Division of Corporations				
1				
NOELLENING				
SUBJECT: NOELLEN INC		···········		
DOCUMENT NUMBER: P9900010	5047			
The enclosed Articles of Dissolution and i	fee are submitted for fili	ng.		
Please return all correspondence concerning this matter to the following:				
•		Ü		
MARY FOX				
	Contact Person)			
(Name of	Contact Ferson)			
MARY FOX TAX & ACCOUNTING INC				
(Fin	n/Company)	· · · · ·		
40044 OF HOLIMAN 444				
10941 SE US HWY 441				
. (А	ddress)			
BELLEVIEW FL 34420				
The state of the s	ite and Zip Code)			
•	1 ,			
For further information concerning this ma	tter, please call:			
MARY FOX	at (352) 3	47-4424		
(Name of Contact Person)	at ()	47-4424 & Daytime Telephone Number)		
(Name of Contact Leison)	(Alica Code C	e Baytime Telephone Humber)		
Enclosed is a check for the following amou	ınt:			
✓\$35 Filing Fee \$\square\$\$43.75 Filing Fee &	\$43.75 Filing Fee &	□\$52.50 Filing Fee		
Certificate of Status	Certified Copy	Certificate of Status &		
	(Additional copy is	Certified Copy		
	enclosed)	(Additional copy is		
		enclosed)		
MAILING ADDRESS:	STR	EET ADDRESS:		
Amendment Section		endment Section		
Division of Corporations		sion of Corporations		
P.O. Box 6327		ton Building		
Tallahassee, FL 32314	266	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:
	NOELLEN INC .
SECOND:	The document number of the corporation (if known): P99000105047
THIRD:	The date dissolution was authorized: 12/15/2009
	Effective date of dissolution if applicable: 12/31/2009 (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
	100 5 m
	(voting group) FLORIBA
	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)
	GREG McWHITE (Typed or printed name of person signing)
	PRESIDENT / Madd

Filing Fee: \$35