P02000056175

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	<i>⇒</i> #)
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SECRETARY OF STATE

Diss

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: בוש - 03 - 044 6097
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)
Suppurst Enterprises of South Clorida Inc (Firm/Company)
2220 SE 14Th ST (Address)
Pampane Boach FL 33062 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 941-6685 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Sas Filing Fee Sas Sas Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) Sas Filing Fee & Sas
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION

Pursuant to s of dissolution	ection 607.1403, Florida Statutes, this Florida profit corporation submits the following articles n:	
FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	SUMBURST ENTERPRISES OF South Floridg, INC.	
SECOND:	The document number of the corporation (if known): 70200056175	
THIRD:	The date dissolution was authorized: 1-5-20/0	
	Effective date of dissolution <u>if applicable</u> : /-5 ⁻ -20/0 (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 of 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 ARECRE (voting group)	
	(voting group)	
	RY OF STA SEE, FLOT	
S	Signature: Wm S Lug	
	(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)	
	(Typed or printed name of person signing)	
	Vice Prosident (Title of person signing)	

Filing Fee: \$35