

P020000089319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

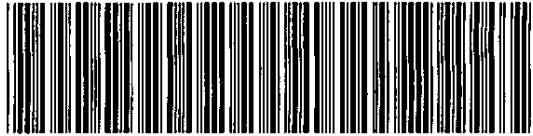
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Corrected document
by telephone call
on 5/5/09

Office Use Only



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04/29/09--01021--005 **35.00

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 APR 29 PM 3:31

Roberts FAX (05/2009)

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of DD-CIE, Inc. d/b/a
La Caraibe

DOCUMENT NUMBER: P02000089319

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

c/o D. Michael Iradi

(Name of Contact Person)

DD-cie, Inc. d/b/a La Caraibe

(Firm/Company)

c/o 112 Royal Park Dr. Apt. 3C

(Address)

Oakland Park, FL 33309 USA

(City/State and Zip Code)

For further information concerning this matter, please call:

D. Michael Iradi

(Name of Contact Person)

at (954) 608-4675

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
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 State:

DD-cie, Inc.

SECOND: The document number of the corporation (if known): PO2000089319

THIRD: The date dissolution was authorized: 23 April 2009

Effective date of dissolution if applicable: 23 April 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

(voting group)

FILED STATES
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
09 APR 29 PM 3:31

Signature: D. Michael Iradi, P.O.A. for Dominique Clergeau

(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)

D. Michael Iradi

(Typed or printed name of person signing)

Power of Attorney for Dominique Clergeau, President
(See attached P.O.A.)
(Title of person signing)

Filing Fee: \$35

GENERAL POWER OF ATTORNEY

Prepared by: (Print signer's name below signature)



Dominic Michael Iradi

This General Power of Attorney is made on 29 September 2003

BETWEEN: the Principal, Dominique Clergeau, whose current address is 112 Royal Park Drive, 3-C, Oakland Park, FL 33309, individually referred to as "I" or "My."

AND: the Agent, Dominic Michael Iradi, whose current address is 112 Royal Park Drive, 3-C, Oakland Park, FL 33309, referred to as "You."

Grant of Authority. I appoint you to act as my Agent (called an Attorney-in-fact) to do each and every act which I could personally do for the following purposes: real estate transactions; chattel and goods transactions; banking transactions; business operating transactions; insurance transactions; estate transactions; claims and litigation; personal relationships and affairs; benefits from military service; records, reports and statements; retirement benefit transactions; making gifts to my spouse/domestic partner, children and remote descendants, and parents, not to exceed in the aggregate \$10,000 to each of such persons in any year; tax matters; immigration and naturalization matters; all matters as concerns litigation, finances and work-related benefits; full and unqualified authority to my attorney-in-fact to delegate any or all of the foregoing powers to any such person or persons whom my attorney-in-fact shall select; all other powers, including as described below.

A. GENERAL POWER TO PERFORM ALL ACTS.

To exercise, do, or perform any act, right, power, duty, or obligation whatsoever that I now have or may acquire the legal right, power, or capacity to exercise, do, or perform in connection with, arising out of, or relating to any person, item, thing, transaction, business, property, real or personal, tangible or intangible, or matter whatsoever;

I grant to my said attorney-in-fact full power and authority to do any perform all and every act and thing whatsoever requisite, necessary, and proper to be done in the exercise of any of the rights and powers herein granted, as fully to all

intents and purposes as I might or could do if personally present, hereby ratifying and confirming all that my said attorney-in-fact, or his substitute(s), shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted to said attorney-in-fact.

B. ENUMERATED POWERS – LIST NOT EXCLUSIVE OF OTHER POWERS.

To ask, demand, sue for, recover, collect, receive, and hold and possess all such sums of money, debts, bonds, notes, checks, drafts, accounts, deposits, legacies, bequests, devises, interests, dividends, stock certificates, certificates of deposit, annuities, pension and retirement benefits, insurance benefits and proceeds, documents of title, chooses in action, personal and real property, intangible and tangible property and property rights, and demands whatsoever, liquidated or unliquidated, as are now, or shall hereafter become owned by, or due, owing, payable or belonging to me or in which I have or may acquire an interest, and to have, use, and take all lawful ways and means and legal and equitable remedies, procedures, and writs in my name for the collection and recovery thereof, and to compromise, settle, and agree for the same, and to make, execute, and deliver for me and in my name all endorsements, acquittances, releases, receipts, or other sufficient discharges for the same;

To lease, purchase, exchange, and acquire, and to bargain, contract, and agree for the lease, purchase, exchange, and acquisition of, and to take, receive and possess any real or personal property whatsoever, tangible or intangible, or interest therein, on such terms and conditions, and under such covenants, as said attorney-in-fact shall deem proper;

To improve, repair, maintain, insure, rent, lease, bargain, sell, release, convey, subject to liens, mortgage and hypothecate, and in any way or manner deal with all or any part of any real or personal property whatsoever, tangible or intangible, or any interest therein, which I now own or may hereafter acquire, for me and in my name, and under such terms and conditions, and under such covenants as said attorney-in-fact shall deem proper;

To deposit in and withdraw monies from any bank, savings bank, or trust company or other banking institution;

To conduct banking transactions as set forth by any applicable code(s) of the law of Florida;

To obtain insurance for the protection of my property. To pay any premium, collect any amount that may become due and to settle and adjust all claims thereon;

To hire or discharge (with or without cause) employees including, but not limited to, physicians, nurses, attorneys, and domestics;

To have full access to any safe deposit box. To prepare and file any tax returns or applications for licenses required by any municipal, state or federal government or agency thereof, and to pay any amount due them. To make claim for and collect any refund or rebate to which I may be entitled;

To invest and reinvest any monies belonging to me in stocks, bonds, mortgages or other securities. To endorse, transfer and assign any certificates of stock or other securities. To vote as my proxy on any stock. To take any action that might be desirable in connection therewith, to protect my investment in such securities;

To institute, prosecute and defend any actions or proceedings brought in any court or before any commission, board or bureau of any municipal, state or federal government or any agency thereof;

To engage in and transact any and all lawful business of whatever nature or kind for me and in my name;

To receive and open my mail, change my mailing address, and otherwise represent me in any matter concerning the U.S. Postal Service;

To continue or discontinue my membership in any club or other organization. To continue, use or terminate any charge or credit card accounts;

To employ and compensate any investment management service, financial institution, or similar organization to advise my attorney-in-fact and to handle all investments and to render all accountings of funds held on my behalf under custodial, agency or other agreements;

To demand, obtain, review and release to others all records, including medical records or other documents protected by patient-physician privilege, or any similar privilege;

To sign, endorse my name, execute, acknowledge, deliver, receive, and possess such applications, contracts, agreements, options, covenants, deeds, conveyances, trust deeds, security agreements, bills of sale, leases, mortgages, assignments, insurance policies, bills of lading, warehouse receipts, documents of title, bills bonds, debentures, checks, drafts, bills of exchange, notes, stock certificates, proxies, warrants, commercial paper, receipts, withdrawal receipts and deposit instruments relating to accounts or deposits in, or certificates of deposit of, banks, savings and loan or other institutions or associations, proofs of loss, evidences of debts, releases, and satisfaction of mortgages, judgments, liens, security agreements, and other debts and obligations, and such other instruments in writing of whatever kind and nature as may be necessary or proper in the exercise of the rights and powers herein granted.

C. REVOCATION AND SUBSTITUTION.

I retain the right to revoke this Power of Attorney. You may also revoke this Power of Attorney. You may also appoint a new agent to take your place. I approve and confirm all that You or your substitute may lawfully do on my behalf.

My attorney-in-fact does not have an affirmative duty to act under this power of attorney and will not be liable for any claim or demand arising out of the acts or omissions of my attorney-in-fact.

DISABILITY

Definition of Disability. A principal shall be under a disability if the principal is unable to manage his or her property and affairs effectively for reasons such as mental illness, mental deficiency, physical illness or disability, advanced age, chronic use of drugs, chronic intoxication, confinement, detention by a foreign power or disappearance.

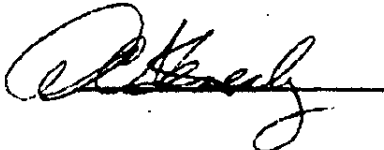
Takes Effect Regardless of Disability. This durable Power of Attorney is not affected by subsequent incapacity or disability of the principal except as provided in s.709.08, Florida Statutes.

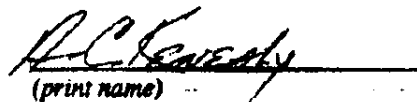
Signatures. By signing below, I acknowledge that I have received a copy of this Power of Attorney and that I understand its terms.

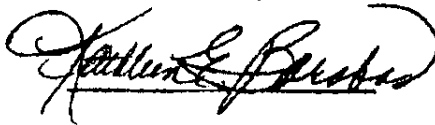
 (Seal)

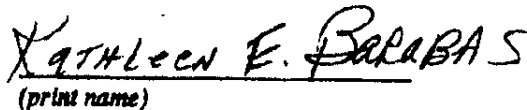
Dominique Clergeau

Signed in the presence of:




(print name)




(print name)

STATE OF FLORIDA, COUNTY OF BROWARD ss.:

I CERTIFY that on 9/29 2003, Dominique Clergeau personally came before me and acknowledged under oath to my satisfaction, that this person:

- (a) is named in and personally signed this document; and
- (b) signed, sealed and delivered this document as his or her act and deed.



Ariene C. Kenedy
Commission # 12000022
Expires March 28, 2008
Bonded With
Atlantic Bonding Co., Inc.


(print name and the title below signature)