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(Requestor's Name)	
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(City/State/Zip/Phone #)	
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(Business Entity Name)	₩3/16/₩5- -₩1 ₩ 3 2₩
(Document Number) Certified Copies Certificates of Status	7
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SECULITON SUBJECT: **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MONICA FAGAN
(Name of Contact Person) ITTY - MAAMA CORP (Firm/Company) 11**557** SW 149 PATH (Address) MIAMI FG 3319 G
(City/State and Zip Code) For further information concerning this matter, please call: MONICA FACTAN Person) at (281) 213 3257.

(Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ☐\$35 Filing Fee \$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:** STREET ADDRESS: Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:	
	ITTY-MARMA CORP	
SECOND:	The document number of the corporation (if known):	
THIRD:	The file date the articles of incorporation:	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	☐ The corporation has not commenced business.	
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.		
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Signature: MJagan		
(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.)		
	MONICA FAGAN	
	(Typed or printed name of person signing)	
	PRESIDENT (Title of Person Signing)	

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: ITTY MRAMA CORPORATION Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: NONE Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00