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Division of Corporations

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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : DIEGO F. RESTREPO, P.A.  
Account Number : 120060000072  
Phone : (305)447-9430  
Fax Number : (305)448-5541

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DISSOLUTION OR WITHDRAWAL  
3EYEGROUP CORP.

Certificate of Status	0
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

OF

3EYEGROUP CORP.

a Florida corporation

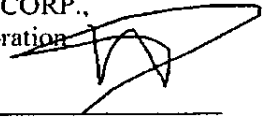
Pursuant to the provisions of Section 607.1403, Florida Statutes, **3EYEGROUP CORP.**, a Florida corporation ("Corporation") hereby adopts the following Articles of Dissolution and certifies the following information for the purpose of dissolving the Corporation:

1. The name and document number of the Corporation is: 3EYEGROUP CORP. and Document No. P06000120095.
2. The dissolution of the Company was authorized on December 31, 2014.
3. The effective date of the dissolution of the Corporation is as of the date set forth below.
4. The Corporation has elected to dissolve as the Corporation pursuant to the written consent of its members.
5. All debts, obligations and liabilities of the Corporation have been paid or discharged.
6. All the remaining property and assets have been distributed to its members in accordance with its respective rights and interests.
7. There are no suits pending against the Corporation in any court.
8. The Articles of Dissolution for 3EYEGROUP CORP., a Florida corporation, were authorized on the 25 day of September, 2015.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Dissolution on behalf of the Corporation on this 25 day of September, 2015.

3EYEGROUP CORP.,  
a Florida corporation

By:

  
Hernan Jaramillo, President

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**NOTICE OF CORPORATION DISSOLUTION**

**OF**

**3EYEGROUP CORP.**

**a Florida corporation**

This notice is submitted by the dissolved Corporation named below for resolution of payment of unknown claims against this Corporation as provided in Section 607.1403, Florida Statutes.

Name of Corporation: 3EYEGROUP CORP.

The date of dissolution will be September 25, 2015.

**Description of information that must be included in a claim:**

Name of claimant with a postal address, together with a description as to how the claim arose, attaching invoices, if any.

**Mailing address where claims may be sent:**

c/o Diego L. Restrepo, Esq.  
Diego L. Restrepo, P.A.  
2600 S. Douglas Road, Suite 913  
Coral Gables, FL 33134

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.

3EYEGROUP CORP.,  
a Florida corporation



By: \_\_\_\_\_  
Hernan Jaramillo, President

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