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L'ARTISTA PIZZA USA, INC.

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COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: L'Artista Pizza USA, Inc. DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Stephen Zagami (Name of Contact Person) Next Legal PLLC (Firm/Company) 1200 Brickell Ave. Suite 650 (Address) Miami, FL, 33131 (City/State and Zip Code) For further information concerning this matter, please call: Stephen Zagami (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, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) **Mailing Address: Street Address:** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

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: L'Artista Pizza USA, Inc.				
SECOND:	The document number of the corporation (if known):				
THIRD:	The date dissolution was authorized:				
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we not be listed as the document's effective date on the Department of State's records.	i1l			
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.				
	FALLAHÄSSEE, FLORIDA 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)				
	Andreas Moser				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				

Filing Fee: \$35