

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Disolution of Corporation

DOCUMENT NUMBER: P99000107488

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

Please return all correspondence concerning this matter to the following:

Maneiro-Hermoso, Veronica

(Name of Contact Person)

HARVARD WHOLESALE AND MEDICAL SUPPLIES CORP.

(Firm/Company)

5265 Nw 112th Ave Unit 106

(Address)

Doral, Fl 33178

(City/State and Zip Code)

For further information concerning this matter, please call:

Veronica Maneiro-Hermoso at (305) 926-0929

(Name of Contact Person)

(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

14 AUG 12 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FL 32301

FILED

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:
HARVARD WHOLESALE AND MEDICAL SUPPLIES CORP.

SECOND: The document number of the corporation (if known): P99000107488

THIRD: The date dissolution was authorized: August 5, 2014

Effective date of dissolution if applicable: August 5, 2014
(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.

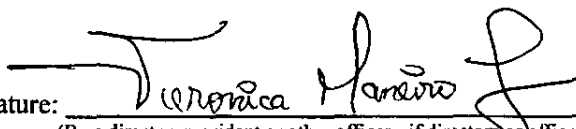
The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

100

(voting group)

FILED
 14 AUG 12 AM 11:48
 SECRETARY OF STATE
 TALLAHASSEE, 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)

Veronica Maneiro-Hermoso

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35