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TALLANX OF STATE

C. LEWIS
JU 132009
EXAMINER

COVER LETTER'

TO: Registration Section Division of Corporations INTERNATIONAL MEAL COMPANY (FLORIDA), LL C
(Name of Limited Liability Company) The enclosed Articles of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Fatima Kierski
(Name of Person) International Meal Company 701 Brickell Avenue, Suite 1280 Miami, Florida 33/3/
(City/State and Zip Code) For further information concerning this matter, please call: Fatima Kiers Ki at (786) 431-4200 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$25.00 Filing Fee \$55.00 Filing Fee & \$60.00 Filing Fee, 30.00 Filing Fee &

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2009 JUL 10 PM 2: 01

1. The name of a limited liability company is	SEURETARY OF STATE TABLAHASSEE, FLORIDA
INTERNATIONAL MEAL COME	PANY (FLORIDA), LLC
2. The Articles of Organization were filed on Novembe L 08000 108693	r
3. The date the dissolution was approved: June 1	9,2009
4. A description of occurrence that resulted in the limited lial 608.441, Florida Statutes, (copy 608.441 on back cover le	bility company's dissolution pursuant to section tter).
Written consent of all t	
INTERNATIONAL MEAL COM	PANY (FLORIDA), LLC
5. CHECK ONE:	
All debts, obligations and liabilities of the limited OR-OR-Adequate provision has been made for the debts, of the limited are rights and interests. 7. CHECK ONE: There are no suits pending against the company in	obligations and liabilities pursuant to s. 608.4421. mong its members in accordance with their respective
OR-	ction of any judgment, order or decree which may be
Signatures of the members having the same percentage of members	pership interests necessary to approve the dissolution:
Signature /	Printed Name
(ou/-).	Javier Gavilan