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# **COVER LETTER**

TO: Amendment Section Division of Corporations	(Me	N PROFITOREANIZATION
Division of Corporations  SUBJECT:	BRATIONS: {FO	R: MSSOLUTION
DOCUMENT NUMBER: V-04-0	0000 5165	
The enclosed Articles of Dissolution and fee a	re submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
MARIA G. SONZA (Name of C)  EXMI ASUMNI I  (Firm/C)  995 S. W. 84  MIAMI - FLORA (City/State a)	LEZ -TREASUN	lek
(Name of C	ontact Person)	
CXMI AJUMNI 1	nc-	
0.65 P. U. 8.4 774	Company)	100
(Add	lress)	106
MIANI- FLOR	DA - 33/44	,
(City/State a	nd Zip Code)	
For further information concerning this matter,		
MALIA C. GONZALEZ (Name of Contact Person)	at ( 305 ) 26	6-5692
(Name of Contact Person)	(Area Code & Daytime	eTelephone Number)
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 &
	•	1.0
	enclosed)	(Additional copy is
		enclosed) (CX# 2 47) #52.5
MAILING ADDRESS.	STDEET A	nnpres.

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

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

# 3

# ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	EXMI ALUMNI INC
SECOND:	The document number of the corporation (if known): NO450000 5165
THIRD:	The file date of the articles of incorporation:
FOURTH	The corporation has not commenced to conduct its affairs.
FIFTH:	No debts of the corporation remains unpaid.
SIXTH:	Adoption of Dissolution (CHECK ONE)  (Note: Cannot be authorized by an incorporator if the corporation has directors:
	OR The dissolution was authorized by a majority of the directors.
	☐ The dissolution was authorized by an incorporator. ☐ The dissolution was authorized by an incorporator. ☐ 7
	The dissolution was authorized by a majority of the incorporators.
Signa	(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	MARIA C. GONZALEZ  (Typed or printed name of person signing)
	TRASURER (Title of person signing)

Filing Fee: \$35