

19300005699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

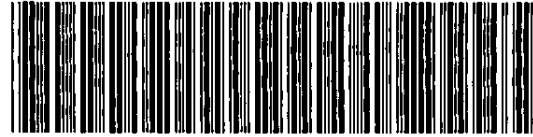
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/23/12--01020--004 **35.00

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2012 AUG 23 PM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/24/12
D. S. G.

Maggalena Forlanza
2597 Lancewood Street
Bunnell, FL 32110

Request taken by: dcushing
08-07-2012

The forms you recently requested from this office are:

- (1) 312. Dissolution N/P Corp

Should you have any questions or need any further information,
please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION Mondex Share A Pet Inc

DOCUMENT NUMBER: N93000005699

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

Please return all correspondence concerning this matter to the following:

MAGDALENA A FORLENZA

(Name of Contact Person)

MONDEX SHARE A PET INC

(Firm/Company)

2597 LANCEWOOD STREET

(Address)

BUNNELL, FL 32110

(City/State and Zip Code)

For further information concerning this matter, please call:

Magdalena FORLENZA at (386) 437-8459

(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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, 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:

MONDEX SHARE A P&T INC

SECOND: The document number of the corporation (if known): 1193000005699

THIRD: Adoption of Dissolution
(COMPLETE SECTION I OR II)

SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

☒ The date of the meeting of members at which the resolution to dissolve was adopted

August 20 2012 The number of votes cast by the members was sufficient for approval.

☐ The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was _____.

The number of directors in office was 3 and the vote for resolution was

3 ~~1~~ for and 0 against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: August 20 2012
(no more than 90 days after dissolution file date)

Signature Magdalena A Forlenza
(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.)

MAGDALENA A FORLENZA
(Typed or printed name of the person signing)

DBA
(Title of person signing)

FILING FEE: \$35