

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1515

**DISSOLUTION OR WITHDRAWAL
BRAMAN FAMILY FOUNDATION, INC.**

Certificate of Status	0
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Page Count	03
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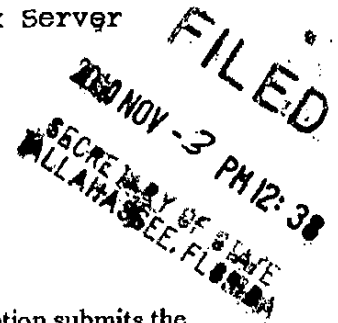
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D.S.



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:

Braman Family Foundation, Inc.

SECOND: The document number of the corporation (if known): N94000006314

THIRD: Adoption of Dissolution
(Complete Section I or II)

SECTION I

If the corporation has members entitled to vote:

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

(CHECK ONE)

- ☐ The number of votes cast for dissolution was sufficient for approval.
- ☐ The resolution was adopted by written consent and executed in accordance with 617.0701, Florida Statutes.

SECTION II

If the corporation has no members of members entitled to vote on the dissolution.

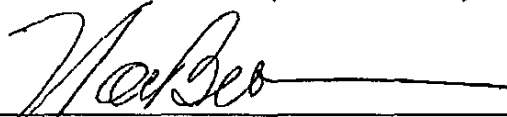
The corporation has no members of members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was October 27, 2010.

The number of directors in office was 4 and the vote for resolution was 4 for and 0 against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: upon filing
(no more than 90 days after dissolution file date)

Signature



(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).

Norman Braman

(Typed or printed name of the person signing)

President

(Title of person signing)

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