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COVER LETTER

SUBJECT: DISSOLUTION OF NON-PROFIT		
DOCUMENT NUMBER: N97000002250		
The enclosed Articles of Dissolution and fe	ee are submitted for filing.	
Please return all correspondence concerning	this matter to the following	;:
DORALBA MUNOZ		
(Name o	of Contact Person)	
UNION POSITIVA, INC.		
(Fir	nn/Company)	
3650 NW 19 TERRACE		
	Address)	
MIAMI, FLORIDA 33125		
(City/Sta	ate and Zip Code)	
For further information concerning this matt	ter, please call:	
DORALBA MUNOZ	305 915-8 ¹	948
(Name of Contact Person)	(Area Code) (Da	aytime Telephone Number)
Enclosed is a check for the following amount	nt:	
□ \$35 Filing Fee □ \$43.75 Filing Fee of Certificate of State		S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

TO: Amendment Section

Division of Corporations

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

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following

Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Union Position In. The document number of the corporation (if known): N9700002250 SECOND: THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II) SECTION 1 If the corporation has members entitled to vote: (CHECK/COMPLETE ONE) The date of meeting of members at which the resolution to dissolve was apopted. MARCH 30, 2019. 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 _____ and the vote for resolution was _____ for and _____ against. (Must be a majority vote) Effective date of dissolution, if applicable: APRIL 1, 2019

(no more than 90 days after dissolution file date) FOURTH Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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)

Filing Fee: \$35