P00000036218

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) [PICK-UP	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/7in/Phone th
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Orty/State/Zip/: Holle #)
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL
(Document Number) Certified Copies Certificates of Status	
Certified Copies Certificates of Status	(Business Entity Name)
Certified Copies Certificates of Status	
	(Document Number)
	Cortificates of Status
Special Instructions to Filing Officer:	Certified Copies
	Special Instructions to Filing Officer:
	, -,
	•
l I	

Office Use Only



300015459013

04/21/03--01015--023 **35.00

ALLAMASSEE, FI ORN

C. Coulliette APR 2 1 2003

Document Number Only

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 850-222-1092

DATE: 1/27

Corporation(s) Name

NM DEFICE, IN).C.	
()Profit ()Nonprofit	()Amendment	()Merger
()Foreign ()LLC	(X)Dissolution ()Withdrawal	()Mark
()Limited Partnership ()Reinstatement ()UCC () 1 or () 3	()UBR ()Fititious Name	()Other ()Ch. RA
***Special Instructions**		
()Certified Copy ()arts/ameds/mergers () Other-	()Photocopies See Above	()CUS
(XXX)Walk in	(XXX)Pick-up	()Will Wait

Please Return Filed Stamped Copies To: Katina Solsman

Carol Clark

Thank You!

ARTICLES OF DISSOLUTION

	section 607.1403, Florida Statutes, this Florida profit corporation submits the ticles of dissolution:
FIRST:	The name of the corporation is: NM Office, Inc.
SECOND:	The date dissolution was authorized: March 12, 2003
THIRD:	Adoption of Dissolution (CHECK ONE)
was	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
7 e	Solution was approved by vote of the shareholders through voting groups. The following statement must be separately provided for each voting group Intitled to vote separately on the plan to dissolve:
ine	number of votes cast for dissolution was sufficient for approval by
	The Neiman Marcus Group, Inc. (voting group)
Signature _	med this 24th day of March 2003. Ry the Chairman or Vice Chairman of the Board, President, or other officer)
	Brenda A. Sanders (Typed or printed name)
	Secretary (Title)