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(Address)	_
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TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: SOGNO IMPORTS		
DOCUMENT NUMBER: P00000 73	792	
The enclosed Articles of Dissolution and fee are submitted	ed for filing.	
Please return all correspondence concerning this matter to	the following:	
CRISTIANA GRASS (Name of Person)		
SOGNO IMPORTS, INC. (Name of Firm/Company)		
1000 SOUTH POINTE DEVE	- APT. 503	
(1,144,100)		
MiART BEACH - FLORIDA - 3 (City/State/and Zip C	3139	
(City/State/and Zip C	Code)	
For further information concerning this matter, please cal	1 :	
Clistiano Grassi at (3) (Name of Person) (Area	05) 586 - 6019 Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
U\$35 Filing Fee U\$43.75 Filing Fee & Substitute Status Certified Conference (Additional enclosed)	opy Certificate of Status &	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section	
P.O. Box 6327	Division of Corporations 409 E. Gaines Street	
Tallahassee, Florida 32314 Tallahassee, Florida		

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Department of State:	
	GOGNO IMPORTS IMC.	
SECOND:	The document number of the corporation (if known): <u>P00000073792</u>	
THIRD:	The date dissolution was authorized: December 15, 2004	
	Effective date of dissolution if applicable: December 15 2004 (no more than 90 days after dissolution file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	
	☐ Dissolution was approved by of the shareholders through voting groups.	
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	
	The number of votes cast for dissolution was sufficient for approval by	
	HASE CO.	
(voting group)		
	Signed this 15 day of DECEMBER 201 70 & 0	
	A PAIN 24	
Signati	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator	
	if in the hands of a receiver, trustee, or other court appealated fiduciary, by that fiduciary)	
	(Typed or printed name of person signing)	
	(1) hon or hissings mine or human admine)	
	TRESIDENT (Title of person signing)	

Filing Fee: \$35