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Office Use Only



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COVER LETTER

| TO: Amendment Section Division of Corporations | |
|--|--|
| SUBJECT: Lawrie Rich Corporation | oh |
| DOCUMENT NUMBER: <u>P0100046570</u> | |
| The enclosed Articles of Dissolution and fee are submitted | for filing. |
| Please return all correspondence concerning this matter to the | ne following: |
| Laurie R. Lev. | inson_ |
| (Name of Contact Person) | prporation |
| (Firm/Company) 1526 Victoria Is | |
| (Address) Weston, FL 3 | 33327 |
| (City/State and Zip Code) |) |
| For further information concerning this matter, please call: | |
| (Name of Contact Person) at (95) | 384-7996 Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: | |
| S35 Filing Fee \$\times\$\$43.75 Filing Fee \$\times\$\$ Certificate of Status Certified Copy (Additional copy enclosed) | y Certificate of Status & |
| 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 |

ARTICLES OF DISSOLUTION

| | section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles |
|--------------|--|
| of dissoluti | on: $F_{F \to \infty}$ |
| | 11.AIE 22 |
| FIRST: | The name of the corporation as currently filed with the Florida Department of State: |
| | $\sim 1.07 \text{ M} \cdot 1.07 \text{ M} \cdot 1.07 \text{ Matrix (ARY or \sim 1.00 \text{ M} \cdot 1.00 \text{ M})}$ |
| | Lawre Rich Corporation |
| SECOND: | The document number of the corporation (if known): \(\frac{1000046570}{00000000000000000000000000000000000 |
| THIRD: | The date dissolution was authorized: |
| | Effective date of dissolution if applicable: \(\lambda \frac{3}{10} \) (no more than 90 days after dissolution file date) |
| | (no more function and 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 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 |
| | |
| | (voting group) |
| | |
| | |
| | |
| | Signature: Sauli L. Levinson |
| | Signature: (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 appointed fiduciary, by that fiduciary) |
| | P = P = P = P = P = P = P = P = P = P = |
| | Laurie R Levinson |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |

Filing Fee: \$35