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(Requestor's Name) (Address)	. 0
(Address)	#
(City/State/Zip/Phone #)	(A) Voldis
(Business Entity Name)	
(Document Number) Certified Copies Certificates of Status	
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Voldis W/notice

12/07/04--01013--010 **43.75

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Dissolution of Corporation.
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maria V. Cilli (Name of Person)
Marvi Cilli Inc & Marvi Cilli Inc, d.b.a. Lightouse Compu. (Name of Firm/Company) Technology
P.O. Box 155 (Address)
THORNWOOD, N. 10594-0155 (City/State/and Zip Code)
For further information concerning this matter, please call:
Maria V.C.ili. at (914) 742-4654. (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION

of dissolution	n:
FIRST:	The name of the corporation as currently filed with the Department of State. Marvi Cilli, Inc.
SECOND:	The document number of the corporation (if known): <u>POIDOOD 10959</u>
THIRD:	The date dissolution was authorized: December 1, 2003.
	Effective date of dissolution if applicable: December 1 200 3 (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
	Maria V. Cilli. (voting group) Signed this 2nd day of December, 2004.
Signat	(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)
	(Typed or printed name of person signing)
	President.

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Marvi Cilli, Inc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: This Corporation (Marvi Cilli Inc.) has filed. the Articles of Dissolution on Desember 1, 2004. Marvi Cilli, Inc. (dba. Lighthouse Computer) Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00