

P0100011514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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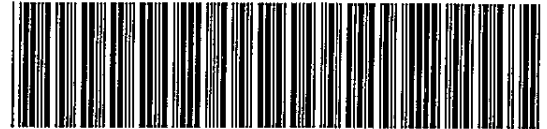
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Law Office of  
Muelle & Associates, LLC

September 24, 2003

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: DISSOLUTION/CERTIFIED COPIES

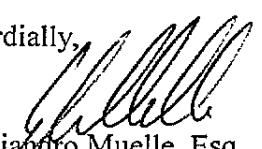
Dear Sir/Madam:

Enclosed please find the Articles of Dissolution for Outlaw Originals, Inc., and a check in the amount of \$43.75 for the filing fee and a certified copy of the dissolution. Please return the certificate to:

Muelle & Associates, LLC  
Attn: Alejandro Muelle  
2100 Coral Way, Suite 502  
Miami, FL 33145

Should you have any questions or comments please contact me at the information provided above. Thank you for your cooperation.

Cordially,

  
Alejandro Muelle, Esq.  
Muelle & Associates, LLC

## 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 is: OUTLAW ORIGINALS, INC.

SECOND: The date dissolution was authorized: AUGUST 28, 2003

THIRD: 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 vote 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

\_\_\_\_\_  
(voting group)

Signed this 28TH day of AUGUST, 2003

Signature \_\_\_\_\_

(By the Chairman or Vice Chairman of the Board, President, or other officer)

JOHN LLOVET

(Typed or printed name)

PRESIDENT / DIRECTOR  
(Title)

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