## P01000115092

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		

Office Use Only



600260113326

05/16/14--01009--016 \*\*35.00



White 14

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
subject: <u>Corporate Diss</u>	olution			
DOCUMENT NUMBER: POIOOO!	15092			
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the	e following:			
(Name of Contact Person)				
(Name of Contact Person)				
Ruzano Inc. (Firm/Company)				
(Firm/Company)				
959 NW 254th Drive (Address)				
(Address)				
Newherry Fl 32/0/09				
Newberry FL 32669 (City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (352)	.) 331-5900 Code & Daytime Telephone Number)			
	· · · · · · · · · · · · · · · · · · ·			
Enclosed is a check for the following amount:				
\$\ \$35 Filing Fee \$\ \tag{S43.75 Filing Fee & Certificate of Status}\$\$ Certified Copy (Additional copenclosed)				
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

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 Florida Department o	fState:	
	Ruzano Inc.		
SECOND:		509.	2
THIRD:	The date dissolution was authorized: December 31,	2013	<u> </u>
	Effective date of dissolution if applicable: (no more than 90 days after dissolution		
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for diss	olution
	☐ Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	entitled	
	The number of votes cast for dissolution was sufficient for approval by		
		11	
	(voting group)	5	
	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)	16 PH 4: 53	TED
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

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.

Name of Corporation: Kuzano, 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:
Date of Service (Goods Sold Description of Service/Goods
Description of Service/Goods
Terms
Dur date
Amount
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  Color Cogra  959 Nw 254 <sup>th</sup> Drive  Newberry, Fl 32669
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence within 4 years after the filing of this notice.
Printed Name of the Person Filing  Signature of the Person Filing
Trained Pulling Total Printing

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