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(R	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)
		
(D	ocument Number)	
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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Disso/stim of Corporation		
DOCUMENT NUMBER: 20200034557		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
(Name of Contact Person) The Embellish Glander, Tree (Firm/Company) 4430 rw 17946 St (Address) Mani Gardens FC 33055 (City/State and Zip Code) For further information concerning this matter, please call:		
Adolfo Gararette at (305) 202-1363 (Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\frac{1}{2}\$		
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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 of State:	
SECOND:	The document number of the corporation (if known): POR 000034557	,
THIRD:	The file date of the articles of incorporation: 03/39/2002	
FOURTH:	(CHECK AT LEAST ONE BOX)	7008
	None of the corporation's shares have been issued.	SEP -
	The corporation has not commenced business.	2 Ar
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	ι .
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	ature: (By a director, president ar other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) (Typed or printed name of person signing) (Title of Person Signing)	- if

Filing Fee: \$35