

P2000066058

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

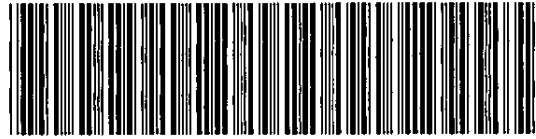
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/17/09--01009--011 **35.00

RECEIVED
09 SEP 17 AM 10:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2009 SEP 17 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/17/09

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ELEGANT PARTY PRODUCTIONS INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- Walk in Pick up time 2:06 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS

- Profit
 Not for Profit
 Limited Liability
 Domestication
 Other

AMENDMENTS

- Amendment
 Resignation of R.A., Officer/Director
 Change of Registered Agent
 Dissolution/Withdrawal
 Merger

OTHER FILINGS

- Annual Report
 Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
 Limited Partnership
 Reinstatement
 Trademark
 Other

Examiner's Initials

ARTICLES OF DISSOLUTION

FILED
2009 SEP 17 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to Section 607.1403, Florida Statutes, this Florida profit corporation has adopted the following articles of dissolution:

FIRST: The name of the Corporation is: ELEGANT PARTY PRODUCTIONS INC.

SECOND: The date of dissolution was authorized: September 1, 2009

THIRD: Adoption of Dissolution (CHECK ONE)

X 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 15th day of September of 2009

Signature: Liliana M. Mercado
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Liliana M. Mercado
(Typed or printed name)
President
(Title)

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

Sworn to and subscribed before me today September 15, 2009 at Miami, FL US by Mrs. Liliana M. Mercado.

[Signature]
Notary Public - State of Florida

My Commission Expires:

