

P02000089242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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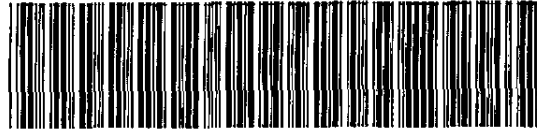
(Business Entity Name)

(Document Number)

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05/04/05--01013--023 \*\*43.75

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2005 MAY -4 PM 1:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dissolution  
LTS  
5-12-05

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISSOLUTION OF LATINAMERICAN LEGAL CONSULTING CORP

**DOCUMENT NUMBER:** P 020000089242

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GIOVANNI PIERANTOZZI

(Name of Person)

LATINAMERICAN LEGAL CONSULTING CORP

(Name of Firm/Company)

4652 NW 90 AVENUE

(Address)

SUNRISE FL 33351

(City/State/and Zip Code)

For further information concerning this matter, please call:

GIOVANNI PIERANTOZZI at (954) 572-3187

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☒ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## 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 of State:

LATINAMERICAN LEGAL CONSULTING CORP

SECOND: The document number of the corporation (if known): P020000089242

THIRD: The date dissolution was authorized: APRIL 4TH, 2005

Effective date of dissolution if applicable: APRIL 18TH, 2005  
(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

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

Signed this 4TH day of APRIL, 2005.

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)

GIOVANNI PIERANTOZZI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED  
2005 MAY -4 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA