P02000089880

(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

w FLDiss 2-8-06

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: [illegible]

DOCUMENT NUMBER: [illegible]

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

Please return all correspondence concerning this matter to the following:

[illegible]
(Name of Contact Person)

[illegible]
(Firm/Company)

[illegible]
(Address)

[illegible]
(City/State and Zip Code)

For further information concerning this matter, please call:

[illegible] at ([illegible]) [illegible]
(Name of Contact 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, 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 of State:

NORMANDY MIAMI INVESTMENTS CORP.

SECOND: The document number of the corporation (if known). P02000094291

THIRD: The date dissolution was authorized: 12/30/05

Effective date of dissolution if applicable: 12/30/05

(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)

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TALLAHASSEE, FLORIDA

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)

GREGORY ...

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

Filing Fee: $35