

PO2000100704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

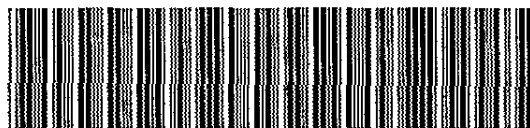
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/02/03--01096--014 \*\*43.75

FILED  
03 MAY -2 PM 3:07  
CLERK OF STATE  
ALLIANCE, FLORIDA

Ps 5/7/03

Maria C. Marquez (PRESIDENT)

Phone # : (305) 623 - 6790

Return Address: 17350 N.E. 6<sup>th</sup> Ave.

North Miami Beach, FL. 33162

Attached : Check for \$43.75   
  $\left\{ \begin{array}{l} \$35 \text{ filing fee} \\ \$8.75 \text{ (Please send me a} \\ \text{Certified Copy of the} \\ \text{Dissolution )} \end{array} \right.$

ARTICLES OF DISSOLUTION

FILED

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

03 MAY -2 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is: \_\_\_\_\_

COTS ICE CREAM, CORP.

SECOND: The filing date of the articles of incorporation was: SEPTEMBER 16, 2002

THIRD: (CHECK ONE)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

FOURTH: No debt of the corporation remains unpaid.

FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SIXTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signed this 28<sup>th</sup> day of APRIL, 2003.

Signature

(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)

MARIA C. MARQUEZ

(Typed or printed name)

PRESIDENT

(Title)