P02000120657

(Re	equestor's Name)	
(Ad	dress)	
, (Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE

10/20/10

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: V TWIN MOTORCYCLE APPAREL, INC.	
DOCUMENT NUMBER: P02000120657	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	g:
AARON MOSES	· · · · · · ·
(Name of Contact Person)	
V TWIN MOTORCYCLE APPAREL, INC.	
(Firm/Company)	
5931 RAVENSWOOD RD., Unit A19	
(Address)	
DANIA BEACH, FL 33312	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
AARON MOSES at (954) 987	
(Name of Contact Person) (Area Code & D	aytime Telephone Number)
Enclosed is a check for the following amount:	
□\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☑ Certificate of Status Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Amendment Section Amend Division of Corporations Divisio P.O. Box 6327 Clifton	T ADDRESS: ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FILED

of dissoluti	section 607.1403, Florida Statutes, this Florida profit corporalions the following article on: SECRETARY OF STATE TALLAHASSEE.FLORIDE
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	V TWIN MOTORCYCLE APPAREL, INC.
SECOND:	The document number of the corporation (if known): P02000120657
THIRD:	The date dissolution was authorized: October 13, 2010
	Effective date of dissolution if applicable: October 13, 2010 (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 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)
	Signature: (By director, president of 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)
	AARON MOSES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: V TWIN MOTORCYCLE APPAREL, INC.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
AARON MOSES
V TWIN MOTORCYCLE APPAREL, INC.
5931 RAVENSWOOD RD., Unit A19
DANIA BEACH, FL 33312
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
AARON MOSES Halon Moses
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00