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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

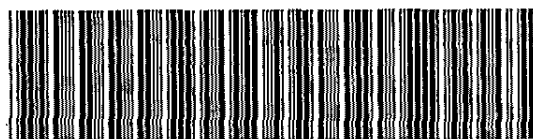
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

✓  
D.S.S./Inactive  
SL

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: DISSOLUTION; SINCOTEL USA, INC.

DOCUMENT NUMBER: 102A00063580

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

Please return all correspondence concerning this matter to the following:

CARLOS A. RUEDA

(Name of Contact Person)

SINCOTEL USA, INC.

(Firm/Company)

1618 EMERALD RIVER DR

(Address)

KATY, TX 77494

(City/State and Zip Code)

For further information concerning this matter, please call:

CARLOS A. RUEDA

(Name of Contact Person)

at (713) 397-5305

(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:

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TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:

SENOCOTEL USA, INC

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

THIRD: The date dissolution was authorized: 08/01/06

Effective date of dissolution if applicable: 08/01/06  
(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

100%  
(voting group)

Signature: 

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator, or in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

CARLOS A. RUEDA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35