30000

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SB RESTAURANT INC				
DOCUMENT NUMBER: <u>\$0300003622</u>				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
(Name of Contact Person)				
LEWAND ZRYD ASSOC CPAS PC (Firm/Company)				
1650 SYCAMORE AVE, SUITE 15 (Address)				
BOHEMIA NY 11716 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (631) 589-8080 (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
S35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)				
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32314 Tallahassee, FL 32301 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF DISSOLUTION

of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the foon:	llowing a	articles
FIRST:	The name of the corporation as currently filed with the Florida Department o	f State:	
	S.B. RESTAURANT, INC.		
SECOND:	The document number of the corporation (if known): PO30000	362	2_
THIRD:	The date dissolution was authorized: 12-31-07		
	Effective date of dissolution <u>if applicable:</u> (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 was sufficient for approval.	for dissol	ution
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group en to vote separately on the plan to dissolve:	ntitled	
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
:	Signature: (By a prector, president or other officer - if directors or officers have not been selected, by	08 MAR 7	DIVISION OF C
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	PH 12: 43	Y OF STATE
	TOSEPH GELSHENEN (Typed or printed name of person signing)	CQL*	SW
	PRESIDENT (Title of person signing)		

Filing Fee: \$35