

FROM : LAZARUS

FAX NO. : 3052201440

Mar. 18 2009 01:16PM P1  
<https://efile.sunbiz.org/scripts/efilecovr.exe>

Florida Department of State  
Division of Corporations  
Public Access System

## Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H09000063342 3)))



H090000633423ABC.

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305) 552-5973  
Fax Number : (305) 220-1440

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 MAR 18 PM 3:04

FILED

## DISSOLUTION OR WITHDRAWAL

**DREAMZ SOUND PROOFING INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

*Disg*  
*3/18/09*

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED  
2009 MAR 18 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H09000063342

## 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:  
DREAM2 SOUNDPROOFING INC.

SECOND: The document number of the corporation (if known): P03000015954

THIRD: The date dissolution was authorized: 03/18/09

Effective date of dissolution if applicable: \_\_\_\_\_  
(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 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)

CARLOS M. GAITAN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

H09000063342

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 MAR 18 PM 3:04

FILED