

P030000031991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

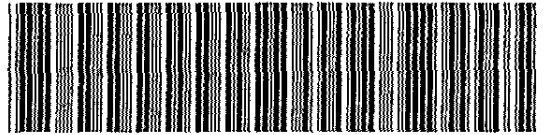
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/01/04--01009--002 **35.00

FILED
04 SEP - 1 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dissolution

T BROWN SEP - 8 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolve our Florida Profit Corporation

DOCUMENT NUMBER: P03000031991

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

Please return all correspondence concerning this matter to the following:

Oscar Lozano

(Name of Person)

Omega KA Enterprises, INC

(Name of Firm/Company)

14936 SW 88 Terrace

(Address)

Miami / FL / 33196

(City/State/and Zip Code)

For further information concerning this matter, please call:

Oscar Lozano

(Name of Person)

at (305) 3828360

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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, Florida 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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 Department of State:

Omega KA Enterprises, INC

SECOND: The document number of the corporation (if known): P03000031991

THIRD: The date dissolution was authorized: 04/2/04

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 of 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)

Signed this Director day of 08/21/04, _____

Signature: Oscar Lozano (Director)

(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)

Oscar Lozano

(Typed or printed name of person signing)

Director

(Title of person signing)

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$35