## P0300003342Z

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
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DIVISION OF CONTROLLED

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## **COVER LETTER**

Division of Corporations	
SUBJECT: The Ezquenazi Group, Inc.	
DOCUMENT NUMBER: p03000033422	
The enclosed Articles of Dissolution and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Paul S. Labiner, Esq.	
(Name of Contact Law Offices of Paul S. Labiner	Person)
(Firm/Comp	pany)
5499 N. Federal Highway, Suite K	
(Address)	
Boca Raton, FL 33487	
(City/State and Z	Zip Code)
For further information concerning this matter, ple	ase call:
Paul S. Labiner, Esq.	(561) 998-2362
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certi (Add	75 Filing Fee & \$\sum \\$52.50 Filing Fee, ified Copy
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, Plorida 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:	
	The Egquenazi Group, Inc.		
SECOND:	The document number of the corporation (if known): P03000033422		
THIRD:	The date dissolution was authorized: December 27, 2007		
	Effective date of dissolution if applicable: December 31, 2007  (no more than 90 days after dissolution)	a file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution	
	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		
		NVISH 07	
	(voting group)	DEC 31 F	
	Signature: Squis Squinosi	SECRETARY OF STATE IN STONE OF CORPORATIONS OF CORPORATIONS	
	(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)		
	Morris Esquenazi		
	(Typed or printed name of person signing)		
	President/Director		
•	(Title of person siming)		

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 Corpo	ration: The Esquenazi Group, Inc.
	tion will be the date the dissolution is filed with the Department of State or as  Articles of Dissolution.
Description of	information that must be included in a claim:
Name of C	Claimant, Address of Claimant, Telephone Number of Claimant,
Amount of	Claim
	<u>.                                    </u>
<del></del>	
Mailing address	where claims can be sent: (Claims cannot be sent to the Division of Corporations)
	Paul S. Labiner, Esq.
	5499 N. Federal Highway, Suite K
	Boca Raton, FL 33487
	the above named corporation will be barred unless a proceeding to enforce the claim is commenced fler the filing of this notice.
Morrie Esc	ujanazi

Printed Name of the Person Filing