

PO3000062660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

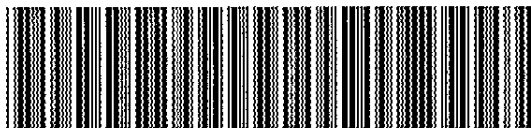
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900038874209

*dis*

07/26/04--01006--024 \*\*35.00

FILED  
04 JUL 26 PM 2:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
04 JUL 26 AM 10:32  
TALLAHASSEE, FLORIDA

ARR  
7/26/04

OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. MCLIS, INC.  
(Corporation Name)

(Document #)

2. \_\_\_\_\_  
(Corporation Name)

(Document #)

3. \_\_\_\_\_  
(Corporation Name)

(Document #)

4. \_\_\_\_\_  
(Corporation Name)

(Document #)



Walk in



Pick up time

2-00



Certified Copy



Mail out



Will wait



Photocopy



Certificate of Status

| NEW FILINGS              |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit            |
| <input type="checkbox"/> | NonProfit         |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication     |
| <input type="checkbox"/> | Other             |

| AMENDMENTS                          |                                       |
|-------------------------------------|---------------------------------------|
| <input type="checkbox"/>            | Amendment                             |
| <input type="checkbox"/>            | Resignation of R.A., Officer/Director |
| <input type="checkbox"/>            | Change of Registered Agent            |
| <input checked="" type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/>            | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

Examiner's Initials

ARTICLES OF DISSOLUTION

Pursuant to Section 607.1403, Florida Statutes, This Florida profit corporation submits the following articles of dissolution:

FILED  
04 JUL 26 PM 2:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is MCLIS, INC.

SECOND: The date dissolution was authorized: 07-23-04

THIRD: Adoption of Dissolution (check one)

☒ Dissolution was approved by the shareholders. The number of votes for dissolution was sufficient for approval.

☐ Dissolution was approved by vote of the shareholders through voting groups.

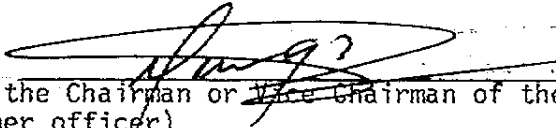
The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

Signed the 23 day of July, 2004

Signature

  
(By the Chairman or Vice Chairman of the Board, President, or other officer)

MARTIN LISCANO

\_\_\_\_\_  
(Typed or printed name)

PRESIDENT - DIRECTOR

\_\_\_\_\_  
(Title)