# P03000087400

| (Req                      | uestor's Name)   |           |
|---------------------------|------------------|-----------|
| (Add                      | ress)            |           |
| (Add                      | ress)            |           |
| (City                     | /State/Zip/Phone | e #)      |
| PICK-UP                   | ☐ WAIT           | MAIL      |
| (Bus                      | iness Entity Nan | ne)       |
| (Doc                      | ument Number)    |           |
| Certified Copies          | Certificates     | of Status |
| Special Instructions to F | iling Officer:   |           |
|                           |                  |           |
|                           |                  |           |
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TAILAHASSEE, FEORIDA

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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| SUBJECT: CHINA TASTE II INC                       |                                                                            |                                                                                                      |
|---------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
|                                                   |                                                                            |                                                                                                      |
| DOCUMENT NUMBER:                                  |                                                                            |                                                                                                      |
| The enclosed Articles of Dissolution and fee a    | are submitted for filing.                                                  |                                                                                                      |
| Please return all correspondence concerning thi   | is matter to the following                                                 | :                                                                                                    |
|                                                   |                                                                            |                                                                                                      |
|                                                   |                                                                            |                                                                                                      |
| (Name of Contact F                                | Person)                                                                    |                                                                                                      |
|                                                   |                                                                            |                                                                                                      |
| CHINA TASTE II INC (Firm/Compan                   | v)                                                                         |                                                                                                      |
| ( C p                                             | ,                                                                          |                                                                                                      |
| 15 DIVISION STREET, 2FL                           |                                                                            |                                                                                                      |
| (Address)                                         |                                                                            |                                                                                                      |
|                                                   |                                                                            |                                                                                                      |
| NEW YORK, NY 10002 (City/State and Zip            | Code)                                                                      |                                                                                                      |
| For further information concerning this matter, p | ilease call:                                                               |                                                                                                      |
| , contained management, p                         |                                                                            |                                                                                                      |
| at                                                | 'f                                                                         |                                                                                                      |
| (Name of Contact Person) (A                       | Area Code & Daytime T                                                      | elephone Number)                                                                                     |
| Enclosed is a check for the following amount:     |                                                                            |                                                                                                      |
| Certificate of Status                             | \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |

### **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**

| following a | orticles of dissolution:                                                                                                                                                                                      |
|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FIRST:      | The name of the corporation as currently filed with the Florida Department of State:                                                                                                                          |
|             | CHINA TASTE II INC                                                                                                                                                                                            |
| SECOND:     | The document number of the corporation (if known):                                                                                                                                                            |
| THIRD:      | The date dissolution was authorized: 7/31/2011                                                                                                                                                                |
|             | 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)                                                                                                                                                                                               |
|             | (Typed or printed name of person signing)                                                                                                                                                                     |
|             | PRESIDENT                                                                                                                                                                                                     |
|             | (Title of person signing)                                                                                                                                                                                     |

Filing Fee: \$35