P03000089351

| (Red | uestor's Name) | |
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| (Add | iress) | |
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| PICK-UP | WAIT | MAIL |
| (Bus | siness Entity Nar | m e) |
| | <u></u> | |
| (Dod | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to F | Filing Officer: | |
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Office Use Only



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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

Tallahassee, Florida 32314

Tallahassee, Florida 32399

| SUBJECT: AZODMEN, CORP. | 7 |
|---|---|
| DOCUMENT NUMBER: P030000893 | 351 |
| The enclosed Articles of Dissolution an | d fee are submitted for filing. |
| Please return all correspondence concern | ning this matter to the following: |
| LUIS T | FORRES |
| (Name | of Person) |
| PRO ACCOUNTIN | IG AND FINANCIAL SOLUTIONS, INC. |
| (Name of Firm/Company) | |
| 1925 NE 45TH ST | FREET SUITE #128 |
| | (Address) |
| FORT LAUDERI | DALE, FL 33308 |
| | y/State/and Zip Code) |
| For further information concerning this t | matter, please call: |
| LUIS TORRES | at (954) 667-0673 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| finclosed is a check for the following am | nount: |
| ☑ \$35 Filing Fee ☐ \$43.75 Filing Fee of Certificate of Status | & 🗆 \$43.75 Filing Fee & 🗆 \$52.50 Filing Fee, s Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS: | STREET ADDRESS: |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations |
| P.O. Box 6327 | 409 E. Gaines Street |



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 22, 2004

LUIS TORRES
PRO ACCOUNTING AND FINANCIAL SOLUTIONS
1925 NE 45TH STREET - SUITE #128
FORT LAUDERDALE, FL 33308

SUBJECT: AZODMEN, CORP. Ref. Number: P03000089351

We have received your document for AZODMEN, CORP, and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU CAN NOT SUBMIT ARTICLES OF REVOCATION OF DISSOLUTION UNTIL YOU HAVE FILED ARTICLES OF DISSOLUTION TO DISSOLVE A CORPORATION.

The application form submitted does not meet the requirements of this office; please complete the attached application form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Document Specialist

Letter Number: 604A00066242

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST: | The name of the corporation as currently filed with Department of State: |
|----------|---|
| | AZODMEN, CORP. |
| SECOND: | The document number of the corporation (if known): P03000089351 |
| THRD: | The file date of the articles of incorporation was: 08/14/2003 |
| FOURTH: | The document number of the corporation (if known): P03000089351 The file date of the articles of incorporation was: 08/14/2003 (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. |
| | None of the corporation's shares have been issued. |
| | ☐ The corporation has not commenced business. |
| FIUTH: | No debt of the corporation remains unpaid. |
| SIXTH: | The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. |
| SEVENTH: | Adoption of Dissolution (CHECK ONE) |
| | A majority of the incorporators authorized the dissolution. |
| | A majority of the directors authorized the dissolution. |
| | Signed this 26TH day of NOVEMBER , 2004 . |
| Signa | ture: (By a director, president or other efficer - 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.) |
| | DAMARYS PALMA (Typed or printed name of person signing) |
| | PRESIDENT (Title of person signing) |

Filing Fee: \$35