

PD3000098608

(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



900280266329

RECEIVED

15 DEC 22 AM 11:04

NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED

15 DEC 22 AM 3:24

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DEC 23 2015

R. WHITE

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 921660 4188E

AUTHORIZATION :

COST LIMIT : \$35.00

[Handwritten Signature]

ORDER DATE : December 21, 2015

ORDER TIME : 4:41 PM

ORDER NO. : 921660-010

CUSTOMER NO: 4188E

DOMESTIC FILINGS

NAME: NORTH AMERICAN UNIVERSAL
MANAGEMENT, INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: North American Universal Management, Inc.

DOCUMENT NUMBER: P03000098608

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

Please return all correspondence concerning this matter to the following:

Sarah Pfannenstiel

(Name of Contact Person)

Bryan Cave LLP

(Firm/Company)

1200 Main Street, Suite 3800

(Address)

Kansas City, MO 64105

(City/State and Zip Code)

For further information concerning this matter, please call:

Sarah Pfannenstiel

(816) 374-3367

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$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, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

ARTICLES OF DISSOLUTION 15 DEC 22 AM 3: 24

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 Florida Department of State:
North American Universal Management, Inc.

SECOND: The document number of the corporation (if known): P03000098608

THIRD: The date dissolution was authorized: December 1, 2015

Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

Joshus S. Landy

(Typed or printed name of person signing)

President

(Title of person signing)

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 Corporation: North American Universal Management, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

(1) claimant name, address, and phone number; (2) name of debtor; (3) account or other number by which the debtor

may identify the creditor; (4) a brief description of the debt or the basis of the claim; (5) the amount of the claim;

(6) the date the claim was incurred; and (7) supporting documentation for the claim, if any.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Joshus S. Landy

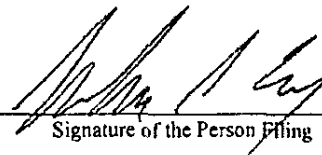
20191 E Country Club Drive, TS8

Aventura, FL 33180

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Joshus S. Landy

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00