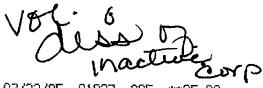
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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	<i>⇒</i> #)
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LAZARUS CORPORATE FILING SERVICE

CORPORATE FILING SERVICE	
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MIAMI, FL 33165 (305) 552-5973	
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CORPORATION NAME(S) & DOCUMENT NUM	IBER(S), (if known):
1. MIAMI HEARING AIR (Corporation Narr 3)	Document #)
2.	•
(Corporation Nan e)	Document #)
3	
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4.	
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Walk in Pick up time 2.00	_ Certified Copy
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NEW FILINGS AMEND	MENTS
	endment
Not for Profit Resi	gnation of R.A., Officer/Director
	nge of Registered Agent olution/Withdrawal
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OTHER FILINGS REGIST	RATION/QUALIFICATION
☐ Annual Report ☐ Fore	ign
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Oborno 1 (#/0#)	<u>Examiner's Initials</u>

CR2E031(7/97)

ARTICLES OF DISSOLUTION Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: The name of the corporation as currently filed with the Florida Departit FIRST: The document number of the corporation (if known): SECOND: The date dissolution was authorized: THIRD: Effective date of dissolution if applicable: (no more than 90 days after dissolution file day 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 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 this 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)

Filing Fee: \$35

(Title of person signing)