## P03000129725

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| PICK-UP                                 | WAIT            | MAIL        |  |
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SECRETARY OF STATE

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## **COVER LETTER**

**TO:** Amendment Section **Division of Corporations** 

Tallahassee, FL 32314

| SUBJECT: INTENT TO DISSOLVE   |  |  |  |  |
|---|--|--|--|--|
| DOCUMENT NUMBER: P0300012972  | 5  |  |  |  |
| The enclosed Articles of Dissolution and fe                               | ee are submitted for filing.   |  |  |  |
| Please return all correspondence concerning                               | this matter to the following:  |  |  |  |
| Connie Sheffield  |  |  |  |  |
| (Name of C  | Contact Person)  |  |  |  |
| Sweetthang Graphic Designs, Inc   |  |  |  |  |
| (Firm/Company)  |  |  |  |  |
| 1635 NE 142 Street  |  |  |  |  |
| (Address)   |  |  |  |  |
| Miami, Fl 33181   |  |  |  |  |
| (City/State   | e and Zip Code)  |  |  |  |
| For further information concerning this matter, please call:              |  |  |  |  |
| Connie Sheffield  | at ()  |  |  |  |
| (Name of Contact Person)  | (Area Code & Daytime Telephone Number)   |  |  |  |
| Enclosed is a check for the following amoun                               | nt:  |  |  |  |
| ☑\$35 Filing Fee ☐\$43.75 Filing Fee & [<br>Certificate of Status         | \$43.75 Filing Fee & \$\ \text{S52.50 Filing Fee,} \\ Certified Copy & Certificate of Status & Certified Copy \\ (Additional copy is \\ enclosed) & (Additional copy is \\ enclosed) |  |  |  |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building  |  |  |  |

2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

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:  Sweetthang Graphic Designs, Inc.  |              |             |  |  |
|---------|---|--------------|-------------|--|--|
| SECOND: | The document number of the corporation (if known):  |              |             |  |  |
| THIRD:  | The date dissolution was authorized:  | ·            |             |  |  |
|         | Effective date of dissolution if applicable:  | i file date) |             |  |  |
| FOURTH: | Adoption of Dissolution (CHECK ONE)   |              |             |  |  |
| •       | Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.   | for dissol   | ution       |  |  |
|         | Dissolution was approved by the shareholders through voting groups.   |              |             |  |  |
|         | The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:   |              |             |  |  |
|         | The number of votes cast for dissolution was sufficient for approval by   | 07 NOV -1 A  | !<br>!<br>} |  |  |
|         | (voting group)  | AM 11: 56    |             |  |  |
| \$      | Signature:  (By a director, president or other officer of 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) | •            |             |  |  |
|         | Connie Sheffield  |              |             |  |  |
|         | (Typed or printed name of person signing)   |              |             |  |  |
|         | D , m   |              |             |  |  |
|         | (Title of person signing)   |              |             |  |  |

Filing Fee: \$35