(Re	equestor's Name)	
(Address)		
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See JUN 05 2006



COVER LETTER

TO: Amendment Section

Division of Corporations			
SUBJECT: Dissolution of Zulli, I	[nc.		
DOCUMENT NUMBER: 36-0238284			
The enclosed Articles of Dissolution and fee are sub	omitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
Sham Parsoli			
(Name of Contact Person)			
Zolli, Inc. (Firm/Compa			
(Firm/Company)			
P. O. Box 1891 (Address)			
(Address)			
West Babylon, NY 11704 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
	(31) 592-8748		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
Certificate of Status Certificate	5 Filing Fee & \$\sum \\$52.50 Filing Fee, led Copy Certificate of Status & conal copy is sed) (Additional copy is enclosed)		
MAILING ADDRESS:	STREET ADDRESS:		
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	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: Zolli, Inc. The document number of the corporation (if known): SECOND: The date dissolution was authorized: _ 5 \5 \0 0 THIRD: Effective date of dissolution <u>if applicable:</u> (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) Shaw Pouss li (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35