P04000058421

(Reque	estor's Name)
(Addre	ess)
(Addre	ess)
(City/S	State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busin	ess Entity Name)
, (Docur	ment Number)
Certified Copies	Certificates of Status
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

X.45.

TB 2-12-09

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Forma VIVa, Inc.
DOCUMENT NUMBER: P0400058421
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Forma Viva Inc. (Name of Contact Person)
Adela Golac (Firm/Company)
(Firm/Company)
1190 NE 37 St (Address)
(Address)
Pempano Beach, FL 33064 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Adula Golac at (954) 941-6585 (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & \$\begin{array}{c} \$\$43.75 Filing Fee & \$\begin{array}{c} \$
MAILING ADDRESS: Amendment Section Amendment Section
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallabassee, 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:
	Forma Viva, Inc.
SECOND:	The document number of the corporation (if known): PG40000 58421
THIRD:	The date dissolution was authorized: 12/10/08
	Effective date of dissolution if applicable: 12/10/08 (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)
	Adula Golaci
	(Typed or printed name of person signing)
	<u>President</u>
	(Title of person signing)

Filing Fee: \$35