Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000129392 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : BERRIZ & GIRALDO P.A.

Account Number : I19990000017

Phone : (305)485-9300 Fax Number : (305)485-1098

DISSOLUTION

BROTHER'S CABINETS, CORP.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing

Public Access Help

C. Coulliette MAY 2 3 2005

https://efile.sunbiz.org/scripts/efilcovr.exe

5/23/2005

Hoso001293923

DE MAY 23 PI

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST: . | The name of th | e corporation | is: BT | COTHER'S | CABINET | 3, C |
|--------------------|--|---------------------------------------|--------------------------|---------------------------------|-------------------------|--------------|
| SECOND: | The date dissol | ution was aut | horized:_ | 05/2: | 2/05 | |
| THIRD; | Adoption of D | issolution (C | неск оле) | | | |
| Dis Was | solution was app sufficient for ap | proved by the | shareholde | ers. The number | of votes cast for disse | olution |
| ☐ Dis | solution was app | proved by vot | e of the sh | reholders throug | h voting groups. | |
| 5 | The following sta entitled to vote se | etement must i eparately on t | be separat he plan to | ely provided for e dissolve: | ach voting group | |
| The | number of vote | s cast for diss | olution wa | s sufficient for ap | proval by | |
| · « | - 1 | · · · · · · · · · · · · · · · · · · · | | | <u> </u> | - |
| | • | | (voting gro | nb) | | |
| Si | gned this | <u>3</u> _day of _ □≥≥V | MAY | , | <u></u> | |
| Signature <u>s</u> | | rman or Vice Cha | iman of the i | Board, President, or oth | er officer) | |
| Signature _ | | ~ | • | Percoz d name) | er officer) | |