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## CORPORATE FILING SERVICE Requester's Name 3320 S.W. 87<sup>TH</sup> AVENUE Address MIAMI, FL 33165 (305) 552-5973 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2,00 Walk in Certified Copy ☐ Mail out ☐ Photocopy Certificate of Status Will wait **NEW FILINGS AMENDMENTS** Profit Amendment Resignation of R.A., Officer/Director Not for Profit Limited Liability Change of Registered Agent ■ Domestication Dissolution/Withdrawal Other ☐ Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other Examiner's Initials CR2E031(7/97)

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## ARTICLES OF DISSOLUTION

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FIRST:	THE NAME O	F THE CORPO	RATION I	S:	
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