P04000125078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _______ Certificates of Status _______

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts JUN 28 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CERGENCO INC

DOCUMENT NUMBER: P04000125078

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEJANDRO KABA
(Name of Contact Person)

KABA CONSULTING INC
(Firm/Company)

1635 E HWY 50 SUITE 103
(Address)

CLERMONT, FL 34711
(City/State and Zip Code)

For further information concerning this matter, please call:

ALEJANDRO KABA at (352) 243-8460
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- [x]
- [ ]
- [ ] Certified Copy (Additional copy is enclosed)
- [ ] Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

EFFECTIVE DATE
6-30-10

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:

CERGENCO INC.

SECOND: The document number of the corporation (if known): P04000125078

THIRD: The date dissolution was authorized: JUNE 22, 2010

Effective date of dissolution if applicable: JUNE 30, 2010
(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)

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TALLAHASSEE, FLORIDA

Signature: Miguel Villada
(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)

MIGUEL VILLADA
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)