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Special Instructions to	Filing Officer:	,
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SECRETARY OF STATE

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COVER LETTER

Amendment Section Division of Corporations

SUBJECT:	DISSOLUTIO	ON OF VALERI T	RANSPO	RTATION AN S	CORP		
DOCUMENT	NUMBER:						
The enclosed	Articles o	f Dissolution	and fee	are submitted	for filing.		
Please return	all corresp	ondence conc	erning th	nis matter to th	e following	ı:	
VALERI KOURE	:NKOV	(Name of 0	Contact	Person)			
VALERI TRANS	PORTATION	/Firm	/Compa	nv)	- · · · · · · · · · · · · · · · · · · ·		
		(1 1111)	Сопра	(' y)			
6365 LONG BO	AT LANE AP	T G107					
		(A	ddress)				
BOCA RATON,	FL 33433						
		(City/State	and Zi	o Code)		<u>-</u>	
For further int	formation co	oncerning this	matter,	please call:			
VALERI KOURE	NKOV		at	561-715-6818			
(Nam	ne of Conta	ict Person)		(Area Code &	Daytime T	elephone Number)	
Enclosed is a	check for t	he following ar	mount:				
x \$35 Filing		l3.75 Filing Fe ertificate of Sta		\$43.75 Filing Certified Cop (Additional co enclosed)	у —	\$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed)	&
MAILIN	C ADDRES	:e. ,		0	STREET A	ADDRESS.	

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building
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:	ST: The name of the corporation as currently filed with the Florida Department of						
	VALERI TRANSPORTATION INC.						
SECOND:	The document number of the corporation (if known): P04000142	470)				
THIRD:	The date dissolution was authorized: 2 10 0 6						
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file d	Jate)					
FOURTH:	Adoption of Dissolution (CHECK ONE)						
	Dissolution was approved by the shareholders. The number of votes cast dissolution was sufficient for approval.	for					
	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 symbol of votes and for dissolving group entitled to vote separately on the plan to dissolve:						
	The number of votes cast for dissolution was sufficient for approval by ASSET OF						
	(voting group)	F STATE FLORIDA	AM 10: 56				
	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)	_					
	(Typed or printed name of person signing)						

Filing Fee: \$35

(Title of person signing)

APPROVE AND