## P04000160890

(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	· · · · · · · · · · · · · · · · · · ·

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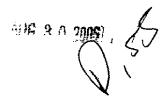
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SECRETARY OF STATE
ALLAHASSEF FI OBIO

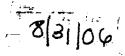


## **COVER LETTER**

TO: Amendment Section  Division of Compartions
Division of Corporations
SUBJECT: Dissolution
DOCUMENT NUMBER: P04000160890
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alicia Garcia
(Name of Contact Person)
(Firm/Company)
332 NW Friar Street
(Address)
Port St Lucie, FL 34983
(City/State and Zip Code)
For further information concerning this matter, please call:
Alicia Garcia at ( 772 ) 370-0767
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
✓\$35 Filing Fee —\$43.75 Filing Fee & —\$43.75 Filing Fee,
Certificate of Status Certified Copy Certificate of Status &
(Additional copy is Certified Copy enclosed) (Additional copy is
enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section  Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, 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:		
	Eduardo Flooring, Inc.		
SECOND:	The document number of the corporation (if known): P04000160890		
THIRD:	The date dissolution was authorized: 08/20/2006		
	Effective date of dissolution if applicable: 08/31/2006  (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)  SECRETARY OF S TALLED  ANASSEE FILE  O O O O		
	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 that fiduciary)		
	Alicia Garcia		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

Filing Fee: \$35