P0600007301

(Red	questor's Name)				
(Add	dress)				
(Add	dress)				
(Cit)	//State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Doc	cument Number)				
Certified Copies	Certificates	s of Status			
Special Instructions to I	Filing Officer:				





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10/18/05--01054--023 **35.00

FILED

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SECRETARY OF STATE
FALLAHASSEF FI DRIDA

OCT 24 2009



COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Mex Processing, Inc.
DOCUMENT NUMBER: <u>P0500000 7301</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David L. Vizcaino (Name of Contact Person)
Mex Processing, Inc. (Firm/Company)
5501 Pierce St.
(Address)
Hollywood, FL 33001 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
David L. Vi 20010 at (954) 608-8721 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\sum_\$43.75 Filing Fee & \$\sum_\$\$43.75 Filing Fee & \$\sum_\$\$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) (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



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: Nex Proceeds in a . Inc.					
SECOND:	The document number of the corporation (if known): \$\frac{050000}{7301}\$					
SECOND.						
THIRD:	The date dissolution was authorized: 10-10-8005					
	Effective date of dissolution if applicable: 10-10-2005 (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 of 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)						
Signature: Briefly						
	(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)					
	David L. Vizcaino					
(Typed or printed name of person signing)						
	Registered Agent/Director/officer					
(Title of person signing)						

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:	Mex	Processin	g, Inc.	·	
Date of dissolution will specified in the Articles	be the date th of Dissolution	e dissolution is filed with m.	n the Department of	f State or as	
Description of informati	on that must	be included in a claim:			
			· · · · · · · · · · · · · · · · · · ·		
			-	<u> </u>	
	<u></u>				
Mailing address where c	laims can be	sent: (Claims cannot be	sent to the Division	of Corporations)	
56	501 PI	erce St od, FC 330		·	
Ho	llvwor	od, FC 330	621		
	7				
			, ,	e contractor to	
A claim against the above within 4 years after the		poration will be barred unotice.	nless a proceeding	to enforce the claim is	commenced
David	VI	zcaino		1/2-	=>
Printed	Name of the Pe	erson Filing	Sign	ature of the Person Filing	_ ·

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00