

PO 50000 44801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

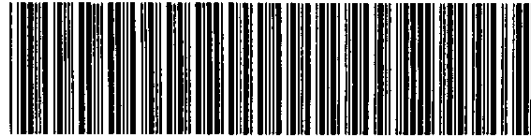
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
TALLAHASSEE, FLORIDA  
13 MAR 18 AM 8:52

Disg 3/26/13

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ONLINE APPLICATION INC.

**DOCUMENT NUMBER:** P05000044801

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

Please return all correspondence concerning this matter to the following:

Alexander Kleyman

(Name of Contact Person)

(Firm/Company)

1850 s Ocean Drive Suite 3504

(Address)

Hallandale Beach FL 33009

(City/State and Zip Code)

For further information concerning this matter, please call:

Alexander Kleyman

(Name of Contact Person)

at (917) 882-9344

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 27, 2013

ALEXANDER KLEYMAN  
1850 S. OCEAN DRIVE  
SUITE 3504  
HALLANDALE BEACH, FL 33009

SUBJECT: ONLINE APPLICATION INC.  
Ref. Number: P05000044801

We have received your document for ONLINE APPLICATION INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Officer must sign document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 113A00004722

RECEIVED  
13 MAR 18 AM 9:45  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## 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:  
**ONLINE APPLICATION INC.**

SECOND: The document number of the corporation (if known): **P05000044801**

THIRD: The date dissolution was authorized: **December 31, 2012**

Effective date of dissolution if applicable: **December 31, 2012**

(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)

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)

**Alexander Kleyman**

\_\_\_\_\_  
(Typed or printed name of person signing)

**President**

\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35**

13 MAR 18 AM 8:52  
SECTION 607.1403  
TALLAHASSEE, FLORIDA