305000058512

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



200184970632

09/03/10--01018--014 **35.00

diss SEP 0 8 2010

EXAMINER

COVER LETTER

Division of Corporations				
SUBJECT: ALTICLES OF DISSOLUTION				
DOCUMENT NUMBER: 7050000585)2				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Luis Souchez				
Luis Souchet (Name of Contact Person)				
SANDETÍ, COEP.				
(Firm/Company)				
(Firm/Company) 5772 STOFFOLD SPUNDS TEL. (Address)				
(Address)				
October, (L 32829				
(City/State and Zip Code)	,			
For further information concerning this matter, please call:				
Luis Souchez at (321	276 224 6 Code & Daytime Telephone Number)			
(Name of Contact Person) (Area C	Lode & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
\$35 Filing Fee \$\bigs\\$43.75 Filing Fee & \$\bigs\\$43.75 Filing I Certificate of Status Certified Copy (Additional copy enclosed)	Fee & []\$52.50 Filing Fee, Certificate of Status & y is 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			

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	f State:	
	Sower, coep.		
SECOND:	The document number of the corporation (if known): 905000058512	······································	<u>.</u>
THIRD:	The date dissolution was authorized: (5/01/2010		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution	file date)	- 1 - 1 - 1 - 1
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast to was sufficient for approval.	for dissolu	ution
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group en to vote separately on the plan to dissolve:	ntitled	i ma.
	The number of votes cast for dissolution was sufficient for approval by	10 SEP -3	IVISION OF
	(voting group)	P	TARY OF OF CORPC
	Signature: (By a director, president or other officer - if directors or afficers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	1 2:49	F STATE PORATIONS
	Diona Souchet		
	(Typed or printed name of person signing)		
	Mresident		
	(Title of person signing)		

Filing Fee: \$35