## P0500007045/

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C.COULLIETTE

APR 28 2009

**EXAMINER** 

## **ECFS**

EXPRESS CORPORATE FILING SERVICE, INC 1000 PONCE DE LEON BLVD., STE: 101 **CORAL GABLES, FL 33134** 

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C	ORPORATION NAME(S) & DO	CUMENT NUMBER(S) (if known):
1.	SENDKITY HOL	DIN 65, CORP. POS 000070451
2.		
_	(Corporation Name)	(Document #)
3.	(Corporation Name)	(Document #)
4.	(Corporation Name)	(Document #)
	Walk in Pick up time Mail out Will wait	Certified Copy  Description Certificate of Status
		<del>-</del>
	NEW FILINGS	AMENDMENTS
	Profit	Amendment
	NonProfit	Resignation of R.A., Officer/ Director
	Limited Liability	Change of Registered Agent
	Domestication	Dissolution/Withdrawal
;	Other	Merger
	OTHER FILNGS	REGISTRATION/
	Annual Report	QUALIFICATION

OTHER FILINGS			
	Annual Report		ं
	Fictitious Name		F
	Name Reservation		L
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REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initials	
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## 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: SENORITY HOLDINGS, CORP. The document number of the corporation (if known):\_P05000070451 SECOND: The date dissolution was authorized: 01-01-2008 THIRD: Effective date of dissolution if applicable: (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: (B) 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) GISELLE MELENDI (Typed or printed name of person signing) P/D (Title of person signing)