

P05000142640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

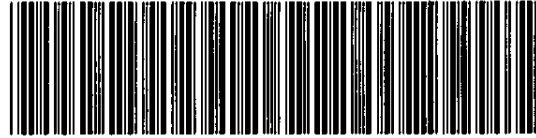
(Document Number)

Certified Copies _____

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RECEIVED

08 APR -7 AM 11:17

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

08 APR -7 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

di ss

C. Southette APR 07 2008

LAZARUS
CORPORATE FILING SERVICE
3320 SW 87TH AVENUE
MIAMI, FL 33165
305-552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. My Buster Enterprises, Inc
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.05 ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☒ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

MY BUSTER ENTERPRISES, INC

SECOND: The document number of the corporation: P05000142640

THIRD: The file date of the articles of incorporation: 10/20/2005

FOURTH: (CHECK ATLEAST ONE BOX)

- ☒ None of the corporation remains unpaid.
☐ The corporation has not commenced business.


FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up
Have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

- ☒ A majority of the incorporators authorized the dissolution.
☐ A majority of the directors authorized the dissolution.

Signed this Saturday, February 09, 2008

Signature: X 
(By director, president or other officer-if directors or officers have been selected, by an incorporator
- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

DAVID FIORE

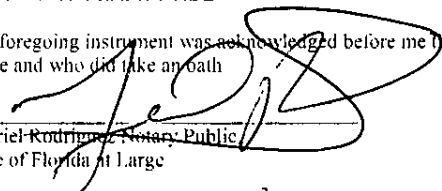
(Typed or printed name of person signing)

President

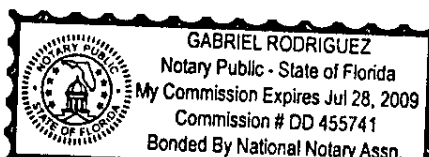
(Title of person signing)

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this February 9, 2008, by DAVID FIORE, President, Who is personally known to me and who did take an oath


Gabriel Rodriguez, Notary Public
State of Florida At Large

My commission Expires:



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA