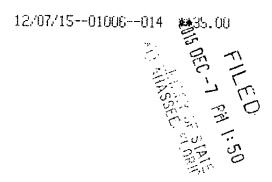
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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	:

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COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: Dissolution of Sobe Realty In	evestments Inc
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution	and fee are submitted for filing.
Please return all correspondence conc	erning this matter to the following:
Sham Kamlani	
(Nar	ne of Contact Person)
	(P) IO
	(Firm/Company)
100 South Pointe Drive, Apt. 1705	
	(Address)
Miami Beach, FL 33139	
(Ci	ty/State and Zip Code)
For further information concerning th	is matter, please call:
Sham Kamlani	at (786 303 0251
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following	amount:
■ \$35 Filing Fee	ee & 🗆 \$43.75 Filing Fee & 🗀 \$52.50 Filing Fee, atus Certified Copy Certificate of Status &
MAILING ADDRESS:	STREET ADDRESS:

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

	ARTICLES OF DISSOLUTION
Pursuant to of dissolutio	Section 1997 - Annual Contract of the Contract
FIRST:	The name of the corporation as currently filed with the Florida Department of State: Sobe Realty Investments Inc.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: 12/31/2014
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi not be listed as the document's effective date on the Department of State's records.
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)
	Sham Kamlani (Typed or printed name of person signing)
	President Control of the President Control of
	(Title of person signing)