

11/10/2009

P06000008003

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

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Account Name : FLORIDA LICENSES AND CORPORATIONS INC
Account Number : 120080000068
Phone : (305) 446-3442
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DISSOLUTION OR WITHDRAWAL

REBELION CHICANA INC

Certificate of Status	0
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November 10, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

REBELION CHICANA INC
12455 SW 256 ST
PRINCETON, FL 33032

SUBJECT: REBELION CHICANA INC
REF: P06000008003

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

SECTION THIRD OF THE DOCUMENT SHOULD READ: THE FILE DATE OF THE ARTICLES OF INCORPORATION IS 01/17/2006 EFF: 01/15/2006.

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) 245-6906.

Darlene Connell
Regulatory Specialist II

FAX And. #: H09000238634
Letter Number: 209A00035311

4090002386343

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:

Rebelon Chicana Inc.

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

P060000803

THIRD: The file date of the articles of incorporation:

1/15/2006

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ 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.

Signature:

[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.)

Amanda Beltricks J.
(Typed or printed name of person signing)

President
(Title of Person Signing)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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