Office Use Only



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LUNE VARY OF STATE
LLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
Division of Corporations	*
SUBJECT: Articles of Dissolution	
DOCUMENT NUMBER: P06000021861	
The enclosed Articles of Dissolution and fee are sub	mitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Hector D Lopez	<u> </u>
(Name of Contact P	erson)
Aqua Globe Corporation	
(Firm/Compar	ny)
2007 Champions Way	
(Address)	
North Lauderdale, FL 33068	
(City/State and Zip	Code)
For further information concerning this matter, pleas	e call:
,	
Hector Lopez at (	954_) 663-3761
(Name of Contact Person)	(Area Code & Day time Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certifi	5 Filing Fee & \$\int_\$\$52.50 Filing Fee, ed Copy
MAILING ADDRESS:	STREET ADDRESS:

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## ARTICLES OF DISSOLUTION

06 OCT -2 PM 4: 09

following
TALLAHASSEE, FLORIDA

Pursuant to articles of di	section 607.1401, Florida Statutes, this Florida profit corporation submits the following issolution:	Y UF STATE EE, FLORIDA
FIRST:	The name of the corporation as currently filed with the Florida Department of State:	_
	Aqua Globe Corporation	
SECOND:	The document number of the corporation (if known): P06000021861	
THIRD:	The file date of the articles of incorporation: 02/14/2006	*
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.	<del>-</del> .
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	_
Sign	(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.)	
	Hector D Lopez	
	(Typed or printed name of person signing)	
	President (Title of Person Signing)	<u>.</u>

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Aqua Globe Corporation	
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.	
Description of information that must be included in a claim:	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced	
within 4 years after the filing of this notice.	
$\langle a \alpha \rangle$	
Haster D.Lanas	
Hector D Lopez  Printed Name of the Person Filing  Signwife of the Person Filing	
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Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00