P06000080877

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SECRETARY OF STATE
SECRETARY OF STATE
OF CORPORATIONS
OF NOV 1-7 PM 3: 35

COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations		
SUBJECT: TROPIACIO SAL	es corp	
DOCUMENT NUMBER: POSO 00	o 80877	
The enclosed Articles of Dissolution and fee are sul	omitted for filing.	
Please return all correspondence concerning this man	ter to the following:	
JUAN CE	PEDA.	
(Name of Comact F	Person)	
(Firm Compa 9363 K (A)	••	
(Address)	2 DE	
OPLANDO, FI	-, 32 827	
(City/State and Zi		
For further information concerning this matter, pleas	e call:	
Name of Contact Person) at (407) 2729936 - 321 (Area Code & Daytime Telephone Numbe	<u>43</u> 64224
Enclosed is a check for the following amount:		
	ed Copy Certificate of Status & Certified Copy	
MAILING ADDRESS:	STREET ADDRESS:	

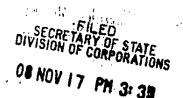
Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle



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:
	TROPIANTO SALES CORP.
SECOND:	The document number of the corporation (if known): P0600080 877
THIRD:	The file date of the articles of incorporation: 06-12-06
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.
Sign	ature:
	(By a director, president or other officer - if directors or difficers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	JUAN CEDEDA.
	(Typed or printed name of person signing)
	(Title of Person Signing)

Filing Fee: \$35