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,
(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: <u>D'S'SOLUTI'ON OF A CORI</u> BUSINESS.	POLATION THAT HAS NOT COMMENCED
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee are s	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
FERNANOINA ONS	
AMA-ZONÍA MIX (Firm/Com	USA CORP.
2714 NW 69 (Address)	,
MARGATE, FL 330	063 Zip Code)
For further information concerning this matter, ple	
ADLEY DASINA a (Name of Contact Person) Enclosed is a check for the following amount:	(Area Code & Daytime Telephone Number)
Certificate of Status Cert (Add	.75 Filing Fee & \$\sum \\$52.50 Filing Fee, ified Copy Certificate of Status & Certified Copy losed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

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:	
	AMAZONIA MIX USA CORP.	
SECOND:	The document number of the corporation (if known):	
THIRD:	The file date of the articles of incorporation: $\frac{8/8/07}{}$	
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: Vermandina +a Siha		
	(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.)	
	(Typed or printed name of person signing)	
	PRESIDENT + DIRECTOR (Title of Person Signing)	

Filing Fee: \$35