

PO7000096238

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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EFFECTIVE DATE
4-30-13

RECEIVED
DEPARTMENT OF STATE
BUREAU OF CORPORATIONS
2013 APR 19 PM 4:30
19 ADVANCE NOTICE
SUFFICIENCY OF FILING

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 APR 19 PM 4:49

APR 22 2013
T. BROWN

Drss.



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 618140 157333A

AUTHORIZATION :

COST LIMIT : \$ 35

Lyndee

ORDER DATE : April 19, 2013

ORDER TIME : 3:39 PM

ORDER NO. : 618140-005

CUSTOMER NO: 157333A

DOMESTIC FILINGS

NAME: FLAVOR FOODS MIRACLE MILE,
INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis - EXT# 2926

EXAMINER'S INITIALS: _____

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:
Flavor Foods Miracle Mile, Inc.

SECOND: The document number of the corporation (if known): P07000096238

THIRD: The date dissolution was authorized: April 18, 2013

Effective date of dissolution if applicable: April 30, 2013
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

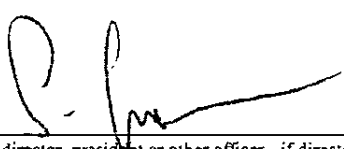
☐ Dissolution was approved by the shareholders through voting groups.

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

Shakim Compere, President

(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)

Shakim Compere

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

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