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PICK-UP	TIAW	MAIL
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Certified Copies Certificates of Status		
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Arce Cafeteria Corp			
DOCUMENT NUMBER:			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
(Name of Contact Person)			
(Firm/Company)			
210: S.W 107 ave			
210: S.W 107 ave (Address) Miami FC 33174 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Contact Person) at (Sos) 272-27-89 (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$35 Filing Fee \$\times \\$43.75 Filing Fee & \$\times \\$43.75 Filing Fee & \$\times \\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)			
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section			
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

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:			
	ARU CAFETERIA, CORP.				
SECOND:	The document number of the corporation (if known): Po 8000022	581	_		
THIRD:	The date dissolution was authorized: 03-01-2008				
	Effective date of dissolution if applicable: 03_01-700-8 (no more than 90 days after dissolution for	ile 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				
	(voting group)				
	Signature: What alim Orce (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) Therefore Area (Typed or printed name of person signing)	08 MAR 24 PH 2: 48	SECRETARY OF STATE DIVISION OF CORPORATIONS		
	Prosident (Title of person signing)				

Filing Fee: \$35