

P 08000040278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

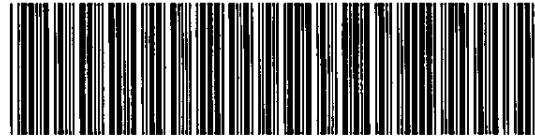
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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14 MAR -7 AM 10:48  
SEAL  
TALLAHASSEE, FLORIDA

VIP

MAR 10 2014

R. WHITE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 18, 2014

YAIR SHALEV  
2410 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33020

SUBJECT: KOBENI INC.  
Ref. Number: P08000040278

We have received your document for KOBENI INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 114A00003666

RECEIVED

14 MAR -6 AM 10:23

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

— Check ATTACHED

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KOBENI INC DISSOLUTION

**DOCUMENT NUMBER:** P08000040278

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

YAIR SHALEV

(Name of Contact Person)

KOBENI INC

(Firm/Company)

2410 HOLLYWOOD BLVD

(Address)

HOLLYWOOD, FL 33020

(City/State and Zip Code)

For further information concerning this matter, please call:

YAIR SHALEV

954

9265644

at ( )

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## 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:  
**KOBENI INC**

SECOND: The document number of the corporation (if known): P08000040278

THIRD: The date dissolution was authorized: 2/15/14

Effective date of dissolution if applicable: \_\_\_\_\_  
(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

\_\_\_\_\_  
(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)

YAIR SHALEV

(Typed or printed name of person signing)

YAIR SHALEV

President

(Title of person signing)

**Filing Fee: \$35**

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