P08000042185

| (Requestor's Name) |
|-----------------------------------------|
| • |
| (Address) |
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| (Address) |
| · |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARY OF STATEONS DIVISION OF CORPORATIONS

COVER LETTER

• TO: Amendment Section
Division of Corporations

| SUBJECT: THE FLINTSTONE GRANITE INC | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| DOCUMENT NUMBER: P08000042185 | |
| DOCUMENT NUMBER: 1 00000042100 | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| MONICA DE LOS RIOS | |
| (Name of Contact Person) | |
| AMERICAS TILE & MARBLE | |
| (Firm/Company) | |
| 4100 N POWERLINE ROAD N3 | |
| (Address) | |
| POMPANO BEACH, FL 33073 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| MONICA DE LOS RIOS at (954) 288-0223 (Name of Contact Person) (Area Code & Daytime Telephone Number) | |
| (Name of Contact Person) (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amount: | |
| ✓\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) | |
| MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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: THY FLINTSTONE GRANITE INC. | |
|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| SECOND: | The document number of the corporation (if known): P08000042185 | |
| ΓHIRD: | The date dissolution was authorized: 4/1/2009 | |
| | Effective date of dissolution <u>if applicable</u> : 4/1/2009 (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 dissowas sufficient for approval. | Intion SCS |
| | was sufficient for approval. Dissolution was approved by the shareholders through voting groups. | TAKC |
| | The following statement must be separately provided for each voting group entitled | CORPORALIO |
| | The number of votes cast for dissolution was sufficient for approval by | 35 |
| | 100% OF VOTING GROUP | |
| | (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) | |
| | Washington Sapoella | |
| | (Typed or printed name of person signing) | |
| | PRES. | |
| | (Title of person signing) | |

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

| Name of Corpo | oration: THE FLINTSTONE GRANITE INC | |
|------------------|-----------------------------------------------------------------------------------------------------------------------------------|------|
| | ation will be the date the dissolution is filed with the Department of State or as extricles of Dissolution. | |
| Description of i | information that must be included in a claim: | |
| ALL SHAF | REHOLDERS AGREE TO DISSOLVED THE COMPANY. | |
| | | |
| | | _ |
| | | _ |
| Mailing address | ss where claims can be sent: (Claims cannot be sent to the Division of Corporations) | |
| | 4032 NE 5TH TERRACE | |
| | OAKLAND PARK, FL 33334 | |
| | | |
| | | |
| | st the above named corporation will be barred unless a proceeding to enforce the claim is commen after the filing of this notice. | .ced |
| WASHING | GTON SARDELLA Ful | |
| <u> </u> | Printed Name of the Person Filing Signature of the Person Filing | |

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00