

P080000 74297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

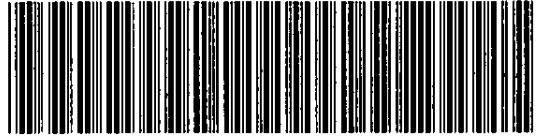
(Document Number)

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2010 FEB 25 PM 12:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

3-1-10

Diss.

TB

MAR - 1 2010

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: DISSOLUTION

DOCUMENT NUMBER: P08000074297

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

Please return all correspondence concerning this matter to the following:

JAVIER ACOSTA

(Name of Contact Person)

ISIS ARCADE, INC

(Firm/Company)

~~7382 SW. 40 ST.~~ 14010 SW. 156 TER.

(Address)

MIAMI, FL. 33177

(City/State and Zip Code)

For further information concerning this matter, please call:

JAVIER ACOSTA

(Name of Contact Person)

at ( 786 ) 473-1927

(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:

Isis Arcade, Inc.

SECOND: The document number of the corporation (if known): P08000074297

THIRD: The date dissolution was authorized: 12/5/09

Effective date of dissolution if applicable: 3/01/10  
(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. 3-1-10

EFFECTIVE DATE

*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)

JAVIER ACOSTA

(Typed or printed name of person signing)

DIRECTOR PRESIDENT

(Title of person signing)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 FEB 25 PM 12:20

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