PO1000089646

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10 MAY 25 PM 3: 31

COVER LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: EWC WESTON, I	NC.
DOCUMENT NUMBER: P0800	0089646
The enclosed Articles of Dissolution	and fee are submitted for filing.
Please return all correspondence cond	erning this matter to the following:
CARLOS M. SAMLUT, CPA	
(Nai	me of Contact Person)
SAMLUT & COMPANY, PA	·
	(Firm/Company)
550 BILTMORE WAY, MEZ	ZANINE - SUITE 200
	(Address)
CORAL GABLES, FLORIDA	A 33134
	ty/State and Zip Code)
For further information concerning th	is matter, please call:
CARLOS M. SAMLUT (Name of Contact Person)	at (305) 461-9518 (Area Code & Daytime Telephone Number)
•	
Enclosed is a check for the following	amount:
▼\$35 Filing Fee \$43.75 Filing F Certificate of St	
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:	
	EWC WESTON, INC.	
SECOND:	The document number of the corporation (if known); P08000089646	
THIRD:	ADDII 29 2010	
	Effective date of dissolution if applicable: APRIL 28, 2010 (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 25	
	(voting group) PH 3: 31 FEORIB	
	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)	
	DAVID COBA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

Filing Fee: \$35